

Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

### Section 1: Cover Sheet

#### Use this form to:

- 1) Register as a lobbyist in accordance with City Code Section 4-8-5;
- 2) Amend or update registration information previously provided in accordance with City Code Section 4-8-5;
- 3) Terminate registration as a lobbyist per City Code Section 4-8-5;
- 4) Report lobbying activities engaged in during the preceding calendar quarter in accordance with Section 4-8-6 of the City Code; or
- 5) For entities electing to register and report as a business entity per City Code Section 4-8-4, this form must be filled out for each individual lobbyist employed by the entity.

For detailed instructions on how to complete this form, see the Lobbyist Reporting Form: Individual Reporting Guide

This form must be submitted in its original digital format. Please do not print or scan this form.

LOBBYIST NAME	Title  Ms.  Last Name*  Haase  My employe	First Name*  Victoria  er is a 501c(3) non-profit organization	Suffix	Middle G					
EMPLOYING ENTITY	behalf	Entity/Organization Name*							
LOBBYIST PERMANENT BUSINESS STREET ADDRESS	Permanent Busi 510 S Congress City* Austin	iness Street Address* Avenue	Apartment or Suite 207 State* TX	Suite Number  Zip Code*  78704					
LOBBYIST BUSINESS MAILING ADDRESS	Business Mailing P.O. Box 41957 City* Austin	g Address*	Apartment or  State*  TX	Suite Number  Zip Code*  78704					



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	☐ I am registering as a new lobbyist
	☐ I am renewing my annual lobbyist registration
	☐ I am updating my current registration information outside of a Quarterly Activity Reporting Period
REPORT TYPE *	I am submitting my Quarterly Activity Report, including client compensation and expenditures, for the following activity reporting deadline:
Check all that apply	☐ January ☐ April ☐ July ☐ October
	☐ I am correcting the information provided on a previously filed report  Previous Report Type: Previous Report Date
	I am terminating my Lobbyist Registration with the City of Austin and this report is my final activity report.



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# Section 2: Municipal Question

For each municipal question on which the individual lobbyist will lobby, provide a separate page with

- 1) a specific description of each municipal question
- 2) an address or legal description of the real property, if real property is the subject of the municipal question
- 3) the subject matter(s) from the list of subjects below that apply to the specific municipal question

SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	Any municipal qı	Any municipal question related to case NPA-2016-0014.01 and C14-2017-0010						
	_	This municipal question pertains to real property. *If checked, either a property address or legal description is required.						
PROPERTY ADDRESS	Address			Suite or Apartmen	t Number			
OR	XX Nuckols Cros	sing Road; prop id#29	93209					
LEGAL DESCRIPTION	City			State	Zip Code			
	Austin			TX	78744			
	Property Legal [	Description						
	, ,		S 24 DELVALLE S ACR 9.997					
Cubic et Matteu/s\*. Chooleall au	la at va attava the		ising a supplier above					
Subject Matter(s)*: Check all su	bject matters th							
Accessibility or Persons with	Disabilities		l Matters, Air or Water atershed Protection	Permits (E	Building, Site Plans)			
		Finance, Budg	et, or Investments	Permits (C	Other)			
Animals		Health, Health Human Service	ncare, Mental Health, or es		ety, Policy, Fire, EMS, or y Planning and Response			
Annexation		Historic Prese	rvation	Public Util or Recycli	lities, Energy, Water, Solid Waste ng			
Arts, Music, Film, Cultural or Creative Industries		Hospitality, To Center	purism, Events, or Convention	n Quality of	Life Affairs			
Aviation		Human Rights	or Immigration	Real Estat	e			
City Infrastructure or Public	Works	Labor or Work	rforce	Rules, Pro	posed Rules, or Rule Making			
Civil Service, Municipal Emp Retirement Systems	loyment, or	∠ Land Develope     ∠ Land Develope	ment or Land Use	Taxation o	or Fees			
Code Compliance		Municipal Cou	ırt	Technolog	gy or Communications			
		Municipal Leg	islation		ation or Mobility			
Contracts or Procurement		Neighborhood	ds	Zoning or	Platting			
Diversity, Equity, or Inclusion	n	Parks, Recreat	cion, Libraries, or Museums					
Economic Development		Other: Anyt	hing that is required to ob	otain a permit, pla	at or rezoning.			



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- 3) the subject matter(s) from the list of subjects below that apply to the specific municipal question

SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	Any municipal que	estion related to case C14-2017-0050		
DDODEDTV ADDDESS	This municip	al question pertains to real proper s required.	ty. *If checked, either a p	roperty address or legal
PROPERTY ADDRESS	Address		Suite or Apartme	nt Number
OR	1501 Airport Com	nmerce Drive		
LEGAL DESCRIPTION	City		State	Zip Code
	Austin		TX	78741
	Property Legal De	escription		
		PORT COMMERCE SEC 2 RESUB RESUE	3 LOT 1 BLK A	
Subject Matter(s)*: Check all sub	iect matters that	apply to the municipal question a	hove	
Accessibility or Persons with		Environmental Matters, Air or W Quality, or Watershed Protectio	Vater	(Building, Site Plans)
Affordability		Finance, Budget, or Investments	S Permits	(Other)
Animals		Health, Healthcare, Mental Healthcare, Human Services		fety, Policy, Fire, EMS, or cy Planning and Response
Annexation		Historic Preservation	Public Ut or Recyc	cilities, Energy, Water, Solid Waste ling
Arts, Music, Film, Cultural or Creative Industries		Hospitality, Tourism, Events, or Center	Convention Quality of	of Life Affairs
Aviation		Human Rights or Immigration	Real Esta	ite
City Infrastructure or Public V	Vorks	Labor or Workforce	Rules, Pr	oposed Rules, or Rule Making
Civil Service, Municipal Emplo	oyment, or	□ Land Development or Land Use	☐ Taxation	or Fees
Code Compliance		Municipal Court	Technolo	ogy or Communications
		Municipal Legislation		tation or Mobility
Contracts or Procurement		Neighborhoods		r Platting
Diversity, Equity, or Inclusion		Parks, Recreation, Libraries, or N	Museums	
Economic Development		Other: Anything that is requ	iired to obtain a permit, p	lat or rezoning.



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SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	All municipal questions related to C14-2017-0030, C14-86-141(RCT), NPA-2017-0014.01					
DD ODEDTY ADDRESS	This municip	pal question pertains to real proper is required.	rty. *If checked, either a p	property address or legal		
PROPERTY ADDRESS	Address		Suite or Apartme	ent Number		
OR	8008 Burleson R	oad				
LEGAL DESCRIPTION	City		State	Zip Code		
	Austin		TX	78744		
	Property Legal D	escription				
		E S ACR 4.140; ABS 24 DELVALLE S ACR	10.0			
Subject Matter(s)*: Check all su	bject matters tha	t apply to the municipal question a	bove			
Accessibility or Persons with	Disabilities	Environmental Matters, Air or V Quality, or Watershed Protection		(Building, Site Plans)		
Affordability		Finance, Budget, or Investments	s Permits	(Other)		
Animals		Health, Healthcare, Mental Hea Human Services		afety, Policy, Fire, EMS, or ncy Planning and Response		
Annexation		Historic Preservation	Public U or Recyc	Itilities, Energy, Water, Solid Waste cling		
Arts, Music, Film, Cultural or Creative Industries		Hospitality, Tourism, Events, or Center	Convention Quality	of Life Affairs		
Aviation		Human Rights or Immigration	Real Est	ate		
City Infrastructure or Public	Works	Labor or Workforce	Rules, P	roposed Rules, or Rule Making		
Civil Service, Municipal Empl Retirement Systems	loyment, or		Taxation	n or Fees		
Code Compliance		Municipal Court	Technol	ogy or Communications		
		Municipal Legislation		ortation or Mobility		
Contracts or Procurement		Neighborhoods	Zoning o	or Platting		
Diversity, Equity, or Inclusion	า	Parks, Recreation, Libraries, or I	Museums			
Economic Development		Other: Anything that is requ	uired to obtain a permit, p	plat or rezoning.		



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SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	All municipal questions related to case #NPA-2016-0002.01 and C14-2017-0006							
222224222	I —	This municipal question pertains to real property. *If checked, either a property address or legal description is required.						
PROPERTY ADDRESS	Address			Suite or Aparti	ment Number			
OR LEGAL DESCRIPTION	78 San Marcos S	Street						
LEGAL DESCRIPTION	City			State	Zip Code			
	Austin			тх	78702			
	Property Legal [	Description						
	, , ,	LT 43 DIV O SPENCE	ADDN					
Cubic et Matteu/s\*. Chooleall au	la at wasttawa the	-+	ricinal supertion ob sup					
Subject Matter(s)*: Check all su	bject matters th	at apply to the mu	nicipal question above					
Accessibility or Persons with	Disabilities	Environment Quality, or W	tal Matters, Air or Water Vatershed Protection	Nermi	its (Building, Site Plans)			
		Finance, Bud	get, or Investments	Nermi	its (Other)			
Animals		Health, Health Human Servi	thcare, Mental Health, or ces		Safety, Policy, Fire, EMS, or gency Planning and Response			
Annexation		Historic Pres	ervation		C Utilities, Energy, Water, Solid Waste cycling			
Arts, Music, Film, Cultural or Creative Industries		Hospitality, T	Fourism, Events, or Convention	n 🗌 Qualit	ty of Life Affairs			
Aviation		Human Right	ts or Immigration	⊠ Real E	Estate			
City Infrastructure or Public	Works	Labor or Wo	rkforce	Rules	, Proposed Rules, or Rule Making			
Civil Service, Municipal Emp Retirement Systems	loyment, or	∠ Land Develop	pment or Land Use	Taxat	ion or Fees			
Code Compliance		Municipal Co	ourt	Techr	nology or Communications			
		Municipal Le	gislation		portation or Mobility			
Contracts or Procurement		Neighborhoo	ods		g or Platting			
Diversity, Equity, or Inclusion	n	Parks, Recrea	ation, Libraries, or Museums					
Economic Development		Other: Any	thing that is required to ob	otain a permit	, plat or rezoning.			



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To repo	ort more than one Municip	oal Question, click	the the	"Add Additional Municipal Question" b	outton l	below.	
	IFIC DESCRIPTION OF THE UNICIPAL QUESTION*	All municipal questions related to this property. (Thompson Tract)					
ı	PROPERTY ADDRESS	This municipal description is	-	estion pertains to real property. *If chouired.		either a prop	
	OR	XX Old Lockhart R	oad		Suite of	- Apartment	Variaber
ı	LEGAL DESCRIPTION	City			State		Zip Code
		Austin			TX		78747
		Property Legal De	scrip	tion			
				ABS 24 DELVALLE S ACR 65.8950 (1-D-1)			
Subject	: Matter(s)*: Check all sub	ject matters that	арр	y to the municipal question above			
× A	Accessibility or Persons with [	Disabilities		Environmental Matters, Air or Water Quality, or Watershed Protection	$\boxtimes$	Permits (Bui	lding, Site Plans)
X A	Affordability			Finance, Budget, or Investments	$\boxtimes$	Permits (Oth	ner)
A	Animals		$\boxtimes$	Health, Healthcare, Mental Health, or Human Services			y, Policy, Fire, EMS, or Planning and Response
A	Annexation		$\boxtimes$	Historic Preservation		Public Utiliti or Recycling	es, Energy, Water, Solid Waste
	Arts, Music, Film, Cultural or Creative Industries			Hospitality, Tourism, Events, or Convention Center	n 🗀	Quality of Li	
A	Aviation			Human Rights or Immigration	$\boxtimes$	Real Estate	
⊠ c	City Infrastructure or Public V	Vorks		Labor or Workforce		Rules, Propo	osed Rules, or Rule Making
	Civil Service, Municipal Emplo Retirement Systems	yment, or	$\boxtimes$	Land Development or Land Use		Taxation or	Fees
$\boxtimes$ c	Code Compliance			Municipal Court		Technology	or Communications
⊠ C	Construction			Municipal Legislation	$\boxtimes$	Transportati	ion or Mobility
	Contracts or Procurement			Neighborhoods	X	Zoning or Pla	atting
	Diversity, Equity, or Inclusion			Parks, Recreation, Libraries, or Museums			
E	Conomic Development		$\boxtimes$	Other: Anything that is required to ob	otain a <sub>l</sub>	permit, plat	or rezoning.



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10 rep	ort more than one Municip	pai Question, clic	k the "Add Ad	ditional Municipal Question 1	button be	elow.	
	CIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	All municipal questions related to case SPC-2016-0288A (Flower Hill)					
	PROPERTY ADDRESS	This municipal question pertains to real property. *If checked, either a property address or legal description is required.					
	OR	Address			Suite or A	Apartment N	Number
	LEGAL DESCRIPTION	1316 W 6th Stree	et				
		City			State		Zip Code
		Austin			TX		78703
		Property Legal De	escription				
		LOT 15 OLT 3 DIV	Z SMOOT SUBI	O & ADJ 405.5 FT			
Subjec	ct Matter(s)*: Check all sub	ject matters that	t apply to the	municipal question above			
$\boxtimes$	Accessibility or Persons with I	Disabilities		nental Matters, Air or Water or Watershed Protection	$\boxtimes$	Permits (Bui	ilding, Site Plans)
$\boxtimes$	Affordability		Finance,	Budget, or Investments		Permits (Oth	ner)
	Animals		Health, H	lealthcare, Mental Health, or ervices			y, Policy, Fire, EMS, or Planning and Response
	Annexation		Historic F	Preservation		Public Utiliti or Recycling	es, Energy, Water, Solid Waste
	Arts, Music, Film, Cultural or Creative Industries		Hospitali Center	ty, Tourism, Events, or Conventio	n 🗌	Quality of Li	fe Affairs
	Aviation		Human R	ights or Immigration		Real Estate	
$\boxtimes$	City Infrastructure or Public V	Vorks	Labor or	Workforce		Rules, Propo	osed Rules, or Rule Making
	Civil Service, Municipal Emplo Retirement Systems	oyment, or	∠ Land Dev	elopment or Land Use		Taxation or	Fees
	Code Compliance		Municipa Municipa	ll Court		Technology	or Communications
$\boxtimes$	Construction		Municipa Municipa	l Legislation		Transportati	ion or Mobility
	Contracts or Procurement		Neighbor	rhoods		Zoning or Pla	atting
	Diversity, Equity, or Inclusion		Parks, Re	creation, Libraries, or Museums			
	Economic Development		Other:	Anything that is required to ol	btain a p	ermit, plat	or rezoning.



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To rep	ort more than one Municip	oal Question, clic	k the "Add Ad	dditional Municipal Question" l	button b	pelow.		
	CIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	All municipal questions related to case C14-2017-0007, C15-2017-0061, C8-2017-0171.0A (Milestone)						
	PROPERTY ADDRESS	This municip	-	ertains to real property. *If ch	ecked, e	either a prop	perty address or legal	
	OR	Address			Suite or	Apartment N	lumber	
	LEGAL DESCRIPTION	7300 S Congress	Avenue					
	ELGAL DESCRIPTION	City			State		Zip Code	
		Austin			TX			
		Property Legal De	escription					
		TCAD Parcel ID: 3	38189, 338190	), 338197				
Subjec	ct Matter(s)*: Check all sub	ject matters that	apply to the	municipal question above				
	Accessibility or Persons with I	Disabilities		mental Matters, Air or Water or Watershed Protection	$\boxtimes$	Permits (Bui	ilding, Site Plans)	
$\boxtimes$	Affordability		Finance,	Budget, or Investments	$\boxtimes$	Permits (Oth	ner)	
	Animals		Health, I	Healthcare, Mental Health, or Services			y, Policy, Fire, EMS, or Planning and Response	
	Annexation		Historic	Preservation		Public Utiliti or Recycling	es, Energy, Water, Solid Wast	
	Arts, Music, Film, Cultural or Creative Industries		Hospital Center	ity, Tourism, Events, or Conventio	n 🗌	Quality of Li	fe Affairs	
	Aviation		Human I	Rights or Immigration	$\boxtimes$	Real Estate		
$\boxtimes$	City Infrastructure or Public V	Vorks	Labor or	Workforce		Rules, Propo	osed Rules, or Rule Making	
	Civil Service, Municipal Emplo Retirement Systems	oyment, or	∑ Land De	velopment or Land Use		Taxation or	Fees	
$\boxtimes$	Code Compliance		Municip	al Court		Technology	or Communications	
$\boxtimes$	Construction		Municip	al Legislation	$\boxtimes$	Transportat	ion or Mobility	
	Contracts or Procurement		Neighbo	rhoods	$\boxtimes$	Zoning or Pl	atting	
	Diversity, Equity, or Inclusion		Parks, R	ecreation, Libraries, or Museums				
	Economic Development		Other:	Anything that is required to ol	btain a p	permit, plat	or rezoning.	



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SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	Any municipal qu	estion related to case # C8-2017-0292.0A (T	ownbridge)	
PROPERTY ADDRESS	∑ This municipy     description	pal question pertains to real property. * is required.	If checked, either a pr	operty address or legal
OR	Address		Suite or Apartmen	t Number
LEGAL DESCRIPTION	7513 & 7603 Cod	oper Lane		
ELGAL DESCRIPTION	City		State	Zip Code
	Austin		тх	78745
	Property Legal D	escription		
	LOT 1 & LOt 2 *R	RESUB OF TRT 1 GARCIA WILLIE C SUBD; ABS	6 SUR 19 CANNON W A	CR 2.25 (Lot ID 857652)
Subject Matter(s)*: Check all sul	bject matters tha	t apply to the municipal question above	2	
Accessibility or Persons with	Disabilities	Environmental Matters, Air or Water Quality, or Watershed Protection	Permits (I	Building, Site Plans)
		Finance, Budget, or Investments	Permits (0	Other)
Animals		Health, Healthcare, Mental Health, or Human Services		ety, Policy, Fire, EMS, or cy Planning and Response
Annexation		Historic Preservation	Public Uti or Recycli	lities, Energy, Water, Solid Waste ng
Arts, Music, Film, Cultural or Creative Industries		Hospitality, Tourism, Events, or Conve Center	ention	Life Affairs
Aviation		Human Rights or Immigration	Real Estat	te
City Infrastructure or Public \	Works	Labor or Workforce	Rules, Pro	pposed Rules, or Rule Making
Civil Service, Municipal Emplo Retirement Systems	oyment, or		Taxation	or Fees
Code Compliance		Municipal Court	Technolog	gy or Communications
		Municipal Legislation		cation or Mobility
Contracts or Procurement		☐ Neighborhoods		Platting
Diversity, Equity, or Inclusion		Parks, Recreation, Libraries, or Muser	ums	
Economic Development		Other: Anything that is required	to obtain a permit, pla	at or rezoning.



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To report more than one	Municipal Question, c	lick the "Add Additional Municipal Question" bu	itton below.				
SPECIFIC DESCRIPTION O MUNICIPAL QUESTION	. Δny municinal c	Any municipal questions related to case SP-2016-0509C (Met Center II Creative Office-Zydeco)					
PROPERTY ADDRESS	description	cipal question pertains to real property. *If checon is required.	cked, either a prop	perty address or legal			
	Address		Suite or Apartment I	Number			
OR LEGAL DESCRIPTION	8000 Metropol	is Drive					
LEGAL DESCRIPTION	City	5	State	Zip Code			
	Austin	r	ГХ	78744			
	Property Legal	Description					
Subject Matter(s)*: Chec	k all subject matters th	nat apply to the municipal question above					
Accessibility or Perso	ns with Disabilities	Environmental Matters, Air or Water Quality, or Watershed Protection	Permits (Bu	ilding, Site Plans)			
		Finance, Budget, or Investments	Permits (Ot	her)			
Animals		Health, Healthcare, Mental Health, or Human Services		y, Policy, Fire, EMS, or Planning and Response			
Annexation		Historic Preservation	Public Utilit or Recycling	ies, Energy, Water, Solid Waste			
Arts, Music, Film, Cul Creative Industries	tural or	Hospitality, Tourism, Events, or Convention Center	Quality of Li	ife Affairs			
Aviation		Human Rights or Immigration	Real Estate				
City Infrastructure or	Public Works	Labor or Workforce	Rules, Propo	osed Rules, or Rule Making			
Civil Service, Municip	oal Employment, or	□ Land Development or Land Use	☐ Taxation or	Fees			
Code Compliance		Municipal Court	Technology	or Communications			
Construction		Municipal Legislation		ion or Mobility			
Contracts or Procure	ment	Neighborhoods	Zoning or Pl	latting			
Diversity, Equity, or I	nclusion	Parks, Recreation, Libraries, or Museums					
Economic Developme	ent	Other: Anything that is required to obt	ain a permit, plat	or rezoning.			



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SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	All municipal questions related to case SP-2017-0139C (Studio 6 Austin @ US-183- Toral)							
PROPERTY ADDRESS		This municipal question pertains to real property. *If checked, either a property address or legal description is required.						
OR	Address		Suite or Apartm	nent Number				
LEGAL DESCRIPTION	8300 N IH35 S\	/RD SB						
	City		State	Zip Code				
	Austin		TX	78753				
	Property Legal	Description						
Subject Matter(s)*: Check all su	ubject matters th	nat apply to the municipal question above						
Accessibility or Persons with	•	Environmental Matters, Air or Water Quality, or Watershed Protection	Permit	s (Building, Site Plans)				
		Finance, Budget, or Investments	Permit	s (Other)				
Animals		Health, Healthcare, Mental Health, or Human Services		Safety, Policy, Fire, EMS, or ency Planning and Response				
Annexation		Historic Preservation	Public or Recy	Utilities, Energy, Water, Solid Waste ycling				
Arts, Music, Film, Cultural o Creative Industries	r	Hospitality, Tourism, Events, or Convention Center	on 🗌 Quality	of Life Affairs				
Aviation		Human Rights or Immigration	Real Es	tate				
City Infrastructure or Public	Works	Labor or Workforce	Rules,	Proposed Rules, or Rule Making				
Civil Service, Municipal Emp Retirement Systems	oloyment, or	□ Land Development or Land Use	Taxatio	on or Fees				
Code Compliance		Municipal Court	Techno	ology or Communications				
Construction		Municipal Legislation		ortation or Mobility				
Contracts or Procurement		☐ Neighborhoods	Zoning	or Platting				
Diversity, Equity, or Inclusion	n	Parks, Recreation, Libraries, or Museums						
Economic Development		Other: Anything that is required to o	btain a permit,	plat or rezoning.				



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SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	All municipal questions related to SP-2017-0143C (Marquis Self Storage - McComb)								
DROBERTY ADDRESS	I —	∑ This municipal question pertains to real property. *If checked, either a property address or legal description is required.							
PROPERTY ADDRESS	Address			Suite or	Apartment N	lumber			
OR LEGAL DESCRIPTION	9718 Anderson M	1ill Road							
LEGAL DESCRIPTION	City			State		Zip Code			
	Austin			TX		78750			
	Property Legal De	escription							
		·							
Subject Matter(s)*: Check all sub	piect matters that	annly to the	municipal question above						
Subject Matter(s) . Check all suc	nject matters that								
Accessibility or Persons with I	Disabilities	Quality,	nental Matters, Air or Water or Watershed Protection	$\boxtimes$	Permits (Bui	lding, Site Plans)			
Affordability		Finance,	Budget, or Investments	$\boxtimes$	Permits (Oth	ner)			
Animals		Health, I	Healthcare, Mental Health, or Services			y, Policy, Fire, EMS, or Planning and Response			
Annexation		Historic	Preservation		Public Utiliti or Recycling	es, Energy, Water, Solid Waste			
Arts, Music, Film, Cultural or Creative Industries		Hospital Center	ity, Tourism, Events, or Conventio	n 🗌	Quality of Li	fe Affairs			
Aviation		Human I	Rights or Immigration	$\boxtimes$	Real Estate				
City Infrastructure or Public V	Vorks	Labor or	Workforce		Rules, Proposed Rules, or Rule Making				
Civil Service, Municipal Emplo	oyment, or	∑ Land De	velopment or Land Use		Taxation or Fees				
Code Compliance		Municip	al Court		Technology	or Communications			
Construction		Municip	al Legislation	$\boxtimes$	Transportati	on or Mobility			
Contracts or Procurement		Neighbo	rhoods		Zoning or Pla	atting			
Diversity, Equity, or Inclusion		Parks, Re	ecreation, Libraries, or Museums						
Economic Development		Other:	Anything that is required to o	btain a po	ermit, plat	or rezoning.			



Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

# Section 2: Municipal Question

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- 3) the subject matter(s) from the list of subjects below that apply to the specific municipal question

SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	All municipal qu	All municipal questions related to SP-2016-0466C (Homewood Suites - Pecan Park, McComb)								
PROPERTY ADDRESS	description	ipal question pertains to real property. n is required.								
OR	Address		Suite or Apartme	nt Number						
LEGAL DESCRIPTION	18011 Pecan Pa	ark Blvd.								
	City		State	Zip Code						
	Austin		TX	78750						
	Property Legal I	Description								
	Troperty Legari	Description								
Subject Matter(s)*: Check all su	bject matters th	at apply to the municipal question abo	ve							
Accessibility or Persons with	Disabilities	Environmental Matters, Air or Wat Quality, or Watershed Protection	er Permits (	Building, Site Plans)						
		Finance, Budget, or Investments	Permits (	Other)						
Animals		Health, Healthcare, Mental Health, Human Services		fety, Policy, Fire, EMS, or cy Planning and Response						
Annexation		Historic Preservation	Public Ut or Recycl	ilities, Energy, Water, Solid Waste ing						
Arts, Music, Film, Cultural or Creative Industries		Hospitality, Tourism, Events, or Con Center	nvention	f Life Affairs						
Aviation		Human Rights or Immigration	🔀 Real Esta							
City Infrastructure or Public	Works	Labor or Workforce	Rules, Pr	Rules, Proposed Rules, or Rule Making						
Civil Service, Municipal Empl Retirement Systems	loyment, or	□ Land Development or Land Use	Taxation	or Fees						
Code Compliance		Municipal Court	Technolo	gy or Communications						
Construction		Municipal Legislation		tation or Mobility						
Contracts or Procurement		Neighborhoods	Zoning o	r Platting						
Diversity, Equity, or Inclusion	n	Parks, Recreation, Libraries, or Mus	seums							
Economic Development		Other: Anything that is require	ed to obtain a permit, pl	at or rezoning.						



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SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	All municipal que	All municipal questions related to SP-2016-0325D (Howdy Honda)								
PROPERTY ADDRESS	description	pal question pertains to real property. * is required.	·							
OR	Address		Suite or Apartmer	nt Number						
LEGAL DESCRIPTION	5519 E. Ben Wh	ite Blvd.								
	City		State	Zip Code						
	Austin		тх	78741						
	Property Legal D	Description								
	Troperty Legar L	25 Caription								
Subject Matter(s)*: Check all su	bject matters tha	at apply to the municipal question above	е							
Accessibility or Persons with	Disabilities	Environmental Matters, Air or Water Quality, or Watershed Protection	Permits (	Building, Site Plans)						
		Finance, Budget, or Investments	Permits (	Other)						
Animals		Health, Healthcare, Mental Health, o Human Services		fety, Policy, Fire, EMS, or cy Planning and Response						
Annexation			Public Ut or Recycl	ilities, Energy, Water, Solid Waste ing						
Arts, Music, Film, Cultural or Creative Industries		Hospitality, Tourism, Events, or Conv Center	rention	f Life Affairs						
Aviation		Human Rights or Immigration	🔀 Real Esta	⊠ Real Estate						
City Infrastructure or Public	Works	Labor or Workforce	Rules, Pro	Rules, Proposed Rules, or Rule Making						
Civil Service, Municipal Empl Retirement Systems	oyment, or	∠ Land Development or Land Use	☐ Taxation	or Fees						
Code Compliance		Municipal Court	Technolo	gy or Communications						
		Municipal Legislation		tation or Mobility						
Contracts or Procurement		Neighborhoods	Zoning or	Platting						
Diversity, Equity, or Inclusion	ı	Parks, Recreation, Libraries, or Muse	ums							
Economic Development		Other: Anything that is required	to obtain a permit, pl	at or rezoning.						



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SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	All municipal questions related to C8J-2017-0071.0A (Amended Plat of Wells Branch)								
DDODEDTY ADDRESS		∑ This municipal question pertains to real property. *If checked, either a property address or legal description is required.							
PROPERTY ADDRESS	Address			Suite or	Apartment N	lumber			
OR LEGAL DESCRIPTION	15200 N IH35 SVF	RD SB							
LEGAL DESCRIPTION	City			State		Zip Code			
	Austin			ТХ		78728			
	Property Legal De	escription							
		<u> </u>							
Subject Matter(s)*: Check all sub	iost matters that	annly to the	municipal question above						
Subject Matter(s) . Check all sub	gect matters that								
Accessibility or Persons with [	Disabilities	Quality,	nental Matters, Air or Water or Watershed Protection	$\boxtimes$	Permits (Bui	lding, Site Plans)			
		Finance,	Budget, or Investments		Permits (Oth	ner)			
Animals		Health, H	Healthcare, Mental Health, or Services			, Policy, Fire, EMS, or Planning and Response			
Annexation		Historic F	Preservation		Public Utilitie or Recycling	es, Energy, Water, Solid Waste			
Arts, Music, Film, Cultural or Creative Industries		Hospitali Center	ty, Tourism, Events, or Conventio	n 🗌	Quality of Lif	fe Affairs			
Aviation		Human F	Rights or Immigration		Real Estate				
City Infrastructure or Public V	Vorks	Labor or	Workforce		Rules, Proposed Rules, or Rule Making				
Civil Service, Municipal Emplo	yment, or	∠ Land Dev	velopment or Land Use		Taxation or Fees				
Code Compliance		Municipa	al Court		Technology	or Communications			
		Municipa	al Legislation		Transportati	on or Mobility			
Contracts or Procurement		Neighbor	rhoods		Zoning or Pla	atting			
Diversity, Equity, or Inclusion		Parks, Re	ecreation, Libraries, or Museums						
Economic Development		Anything that is required to ol	uired to obtain a permit, plat or rezoning.						



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SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	All municipal ques	All municipal questions related to Case SP-2017-0136D (The Spicewood)							
PROPERTY ADDRESS	This municip	al question pertains to real propert s required.	y. *If checked, either a p						
OR	6315 Spicewood S	Continue Danel	Suite of Apartifier	it Number					
LEGAL DESCRIPTION	6315 Spicewood S	springs Road							
	City		State	Zip Code					
	Austin		TX	78759					
	Property Legal De	escription							
Subject Matter(s)*: Check all sub	ject matters that	apply to the municipal question ab	ove						
Accessibility or Persons with I	Disabilities	Environmental Matters, Air or Wa Quality, or Watershed Protection	eter Permits (	Building, Site Plans)					
		Finance, Budget, or Investments	Permits (	Other)					
Animals		Health, Healthcare, Mental Healt Human Services		fety, Policy, Fire, EMS, or cy Planning and Response					
Annexation		Historic Preservation	<u> </u>	Public Utilities, Energy, Water, Solid Waster or Recycling					
Arts, Music, Film, Cultural or Creative Industries		Hospitality, Tourism, Events, or C	onvention Quality o	Quality of Life Affairs					
Aviation		Human Rights or Immigration	🔀 Real Esta	Real Estate					
City Infrastructure or Public V	Vorks	Labor or Workforce	Rules, Pro	oposed Rules, or Rule Making					
Civil Service, Municipal Emplo Retirement Systems	yment, or	□ Land Development or Land Use	Taxation	or Fees					
		Municipal Court	Technolo	gy or Communications					
		Municipal Legislation		tation or Mobility					
Contracts or Procurement		Neighborhoods	Zoning or	r Platting					
Diversity, Equity, or Inclusion		Parks, Recreation, Libraries, or M	useums						
Economic Development		Other: Anything that is require	red to obtain a permit, pl	at or rezoning.					



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SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	All municipal ques	All municipal questions related to case SP-2017-0504C (7-Eleven)								
PROPERTY ADDRESS	This municip description i		pertains to real property. *If ch		ither a prop					
OR	609 W Braker Ln									
LEGAL DESCRIPTION	City			State		Zip Code				
	Austin			TX		78753				
	Property Legal De	escription								
Subject Matter(s)*: Check all sub	ject matters that	apply to the	municipal question above							
Accessibility or Persons with	Disabilities		mental Matters, Air or Water or Watershed Protection	$\boxtimes$	Permits (Bui	ilding, Site Plans)				
		Finance	, Budget, or Investments	$\boxtimes$	Permits (Otl	ner)				
Animals		☐ Health, Human	Healthcare, Mental Health, or Services			y, Policy, Fire, EMS, or Planning and Response				
Annexation		Historic	Preservation		Public Utiliti or Recycling	es, Energy, Water, Solid Waste				
Arts, Music, Film, Cultural or Creative Industries		Hospitality, Tourism, Events, or Conventior Center		n 🗌	Quality of Life Affairs					
Aviation		Human	Rights or Immigration	$\boxtimes$	Real Estate					
City Infrastructure or Public V	Vorks	Labor o	r Workforce		Rules, Proposed Rules, or Rule Making					
Civil Service, Municipal Emplo Retirement Systems	oyment, or	∠ Land De	evelopment or Land Use		Taxation or	Fees				
Code Compliance		Municip	al Court		Technology	or Communications				
		Municip	pal Legislation	$\boxtimes$	Transportat	ion or Mobility				
Contracts or Procurement		☐ Neighbo	orhoods	$\boxtimes$	Zoning or Pl	atting				
Diversity, Equity, or Inclusion		Parks, R	ecreation, Libraries, or Museums							
Economic Development		Other:	Anything that is required to ol	btain a p	ermit, plat	or rezoning.				



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To report more than one Municipal Question, click the "Add Additional Municipal Question" button below.									
SPECIFIC DESCRIPTION O MUNICIPAL QUESTION	. Δll municinal αι	All municipal questions related to case SP-2012-0302C(XT3) (Met Center Bldgs. 3, 4,10)							
PROPERTY ADDRESS	description	cipal question pertains to real property. *If chen is required.		_					
OR		00 Metropolis Dr	Suite or Apartment I	Number					
LEGAL DESCRIPTION		ou Metropolis Dr							
	City		State	Zip Code					
	Austin	•	TX	78744					
	Property Legal	Description							
	Tax Parcel #'s:	0316160102, 0316160104, 0318130207							
Subject Matter(s)*: Chec	k all subject matters th	nat apply to the municipal question above							
Accessibility or Perso	ns with Disabilities	Environmental Matters, Air or Water     Quality, or Watershed Protection	Permits (Bu	ilding, Site Plans)					
Affordability		Finance, Budget, or Investments	Permits (Ot	her)					
Animals		Health, Healthcare, Mental Health, or Human Services	Public Safety, Policy, Fire, EMS, or Emergency Planning and Response						
Annexation		Historic Preservation	Public Utilit or Recycling	ies, Energy, Water, Solid Waste g					
Arts, Music, Film, Cul Creative Industries	tural or	Hospitality, Tourism, Events, or Convention Center	Quality of Li	ife Affairs					
Aviation		Human Rights or Immigration	Real Estate						
City Infrastructure or	Public Works	Labor or Workforce	Rules, Propo	osed Rules, or Rule Making					
Civil Service, Municip Retirement Systems	al Employment, or	Land Development or Land Use	Taxation or	Fees					
Code Compliance		Municipal Court	Technology	or Communications					
Construction		Municipal Legislation	Transportat	ion or Mobility					
Contracts or Procure	ment	☐ Neighborhoods	Zoning or Pl	latting					
Diversity, Equity, or I	nclusion	Parks, Recreation, Libraries, or Museums							
Economic Developme	ent	Other: Anything that is required to obt	tain a permit, plat	or rezoning.					



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SPECIFIC DESCR MUNICIPAL		All municipal questions related to case SP-2017-0300C (Met Center II Campus Plan, Bldg. 15)								
		This municip	•		ertains to real property. *If	checked	, either a prop	perty address or legal		
PROPERTY		Address				Suite	or Apartment I	Number		
0		8001 Metropolis I	Orive							
LEGAL DES	CRIPTION	City				State		Zip Code		
		Austin				TX		78744		
		Property Legal De	scriptio	n						
		Tax Parcel ID: 031	.620050	02, 0316	200503, 0323210103, 032321	.0105, 03	18200502, 0316	5200511, 0316200501		
Subject Matter(s	s)*: Check all sub	ject matters that	apply t	to the i	municipal question above					
Accessibilit	y or Persons with	Disabilities	⊠ Er Qı	nvironm uality, c	nental Matters, Air or Water or Watershed Protection		Permits (Bu	ilding, Site Plans)		
Affordabilit	У		Fi	inance, l	Budget, or Investments		Permits (Ot	her)		
Animals				ealth, H uman S	lealthcare, Mental Health, or ervices	[		y, Policy, Fire, EMS, or Planning and Response		
Annexation	ı		⊠ Hi	istoric P	Preservation	[	Public Utilit or Recycling	ies, Energy, Water, Solid Waste g		
Arts, Music Creative Inc	, Film, Cultural or dustries			ospitalit enter	ty, Tourism, Events, or Conven	ition [	Quality of Li	fe Affairs		
Aviation			□ н	uman R	ights or Immigration		Real Estate			
City Infrastr	ructure or Public V	Vorks	La	abor or '	Workforce	[	Rules, Propo	osed Rules, or Rule Making		
Civil Service	e, Municipal Emplo Systems	oyment, or	⊠ La	and Dev	elopment or Land Use	[	Taxation or	Fees		
Code Comp	liance		M	1unicipa	ll Court	[	Technology	or Communications		
Construction	on		M	1unicipa	ll Legislation		Transportat	ion or Mobility		
Contracts o	r Procurement		☐ Ne	eighbor	hoods		Zoning or Pl	atting		
Diversity, E	quity, or Inclusion		Pa	arks, Re	creation, Libraries, or Museum	ns				
Economic E	Development			ther:	Anything that is required to	obtain a	a permit, plat	or rezoning.		



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SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	All municipal ques	All municipal questions related to case C8-2017-0285.0A (Woodland Park)							
PROPERTY ADDRESS	I —	<ul> <li>This municipal question pertains to real property. *If checked, either a property address or lega description is required.</li> <li>Address</li> <li>Suite or Apartment Number</li> </ul>							
OR	Woodland Ave &	Willow Creek Dr.	Suite of Apartmen	- Transcr					
LEGAL DESCRIPTION			<u> </u>	7' 0 1					
	City		State	Zip Code					
	Austin		TX	78741					
	Property Legal De	escription							
	0305060806, 030	05060807, 0305060808, 0305060809, 030	5060810, 0305060811, 030	05060812, 0305060813					
Subject Matter(s)*: Check all sub	ject matters that	t apply to the municipal question abo	ve						
Accessibility or Persons with	Disabilities	Environmental Matters, Air or Wate Quality, or Watershed Protection	er 🔀 Permits (E	Building, Site Plans)					
		Finance, Budget, or Investments	Permits (C	Other)					
Animals		Health, Healthcare, Mental Health, Human Services		ety, Policy, Fire, EMS, or y Planning and Response					
Annexation			Public Util or Recycli	ities, Energy, Water, Solid Waste ng					
Arts, Music, Film, Cultural or Creative Industries		Hospitality, Tourism, Events, or Cor Center	nvention Quality of	Life Affairs					
Aviation		Human Rights or Immigration	Real Estat	е					
City Infrastructure or Public V	Vorks	Labor or Workforce	Rules, Pro	posed Rules, or Rule Making					
Civil Service, Municipal Emplo Retirement Systems	oyment, or	□ Land Development or Land Use	Taxation o	or Fees					
Code Compliance		Municipal Court	Technolog	y or Communications					
		Municipal Legislation		ation or Mobility					
Contracts or Procurement		Neighborhoods		Platting					
Diversity, Equity, or Inclusion		Parks, Recreation, Libraries, or Mus	seums						
Economic Development		Other: Anything that is require	d to obtain a permit, pla	t or rezoning.					



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SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*		All municipal questions related to case C8-2016-0197, C814-2015-0074, SP-2016-0012D, SP-2016-0013D, C8-2016-0197.1A.SH, C8-2016-0197.1B.SH, SP-2017-0211D.SH, SP-2017-0130C.SH, C814-2015-0074								
	I —	This municipal question pertains to real property. *If checked, either a property address or legal description is required.								
PROPERTY ADDRESS	Address			Suite or Apartme	nt Number					
OR LEGAL DESCRIPTION	4205 Bull Creek	Rd								
LEGAL DESCRIPTION	City			State	Zip Code					
	Austin			TX	78731					
	Property Legal [	Description								
	, , ,	124000202, 01180801	01							
		•								
Subject Matter(s)*: Check all su	bject matters th									
Accessibility or Persons with	Disabilities	Environmenta Quality, or Wa	l Matters, Air or Water Itershed Protection	Permits	(Building, Site Plans)					
		Finance, Budg	et, or Investments	Permits	(Other)					
Animals		Health, Health Human Service	care, Mental Health, or es		fety, Policy, Fire, EMS, or ncy Planning and Response					
Annexation		Historic Prese	rvation	Public Ut or Recyc	tilities, Energy, Water, Solid Waste ling					
Arts, Music, Film, Cultural or Creative Industries		Hospitality, To Center	ourism, Events, or Convention	n	of Life Affairs					
Aviation		Human Rights	or Immigration	Real Esta	ate					
City Infrastructure or Public	Works	Labor or Work	force	Rules, Pr	oposed Rules, or Rule Making					
Civil Service, Municipal Emp Retirement Systems	loyment, or	∠ Land Develope     ∠ Land Develope	ment or Land Use	Taxation	or Fees					
Code Compliance		Municipal Cou	ırt	Technolo	ogy or Communications					
		Municipal Leg	islation	Transpoi	rtation or Mobility					
Contracts or Procurement		☐ Neighborhood	ls	Zoning o	r Platting					
Diversity, Equity, or Inclusio	n	Parks, Recreat	ion, Libraries, or Museums							
Economic Development		Other: Anyt	hing that is required to ob	otain a permit, p	lat or rezoning.					



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SPECIFIC DESCRIPTION OF THI MUNICIPAL QUESTION*	All municipal qu	All municipal questions related to case C8-2017-0187.0A, SP-2017-0076C (Turtle Rock - Milestone)								
DDODEDTY ADDRESS	I —	☐ This municipal question pertains to real property. *If checked, either a property address or legal description is required.								
PROPERTY ADDRESS	Address		Suite or Apartm	ent Number						
OR	12833 Turtle Ro	ock Road								
LEGAL DESCRIPTION	City		State	Zip Code						
	Austin		тх	78729						
	Property Legal	Description								
Subject Matter(s)*: Check all	subject matters th	at apply to the municipal question above								
Accessibility or Persons w	-	Environmental Matters, Air or Water Quality, or Watershed Protection	Permits	s (Building, Site Plans)						
		Finance, Budget, or Investments	Permits	s (Other)						
Animals		Health, Healthcare, Mental Health, or Human Services		Safety, Policy, Fire, EMS, or ency Planning and Response						
Annexation		Historic Preservation	Public I or Recy	Utilities, Energy, Water, Solid Waste voling						
Arts, Music, Film, Cultural Creative Industries	or	Hospitality, Tourism, Events, or Conve	ention	of Life Affairs						
Aviation		Human Rights or Immigration	Real Es	tate						
City Infrastructure or Publ	ic Works	Labor or Workforce	Rules, F	Rules, Proposed Rules, or Rule Making						
Civil Service, Municipal En Retirement Systems	nployment, or	□ Land Development or Land Use	Taxatio	on or Fees						
Code Compliance		Municipal Court	Techno	ology or Communications						
		Municipal Legislation	∑ Transpo	ortation or Mobility						
Contracts or Procurement		☐ Neighborhoods	∑ Zoning	or Platting						
Diversity, Equity, or Inclus	ion	Parks, Recreation, Libraries, or Museu	ıms							
Economic Development		Other: Anything that is required t	to obtain a permit,	plat or rezoning.						



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SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	All municipal questions related to case C14-2015-0062.01 (Met Center 2 - PDA Revision)								
DRODERTY ADDRESS	I —	∑ This municipal question pertains to real property. *If checked, either a property address or legal description is required.							
PROPERTY ADDRESS	Address			Suite or	Apartment N	lumber			
OR LEGAL DESCRIPTION	2900-3024 US Hw	y 183 South							
LEGAL DESCRIPTION	City			State		Zip Code			
	Austin			TX		78744			
	Property Legal De	scription							
		·							
	iect matters that	apply to the m	unicipal guestion above						
Accessibility or Persons with I		Environme	ntal Matters, Air or Water Watershed Protection		Permits (Bui	ilding, Site Plans)			
Affordability		Finance, Bu	idget, or Investments	$\boxtimes$	Permits (Oth	ner)			
Animals		Health, Health, Health, Human Ser	althcare, Mental Health, or vices			y, Policy, Fire, EMS, or Planning and Response			
Annexation		Historic Pre	eservation		Public Utiliti or Recycling	es, Energy, Water, Solid Waste			
Arts, Music, Film, Cultural or Creative Industries		Hospitality,	Tourism, Events, or Conventio	n 🗌	Quality of Li	fe Affairs			
Aviation		Human Rigi	hts or Immigration	$\boxtimes$	Real Estate				
City Infrastructure or Public V	Vorks	Labor or W	orkforce		Rules, Propo	osed Rules, or Rule Making			
Civil Service, Municipal Emplo	oyment, or	□ Land Develed	opment or Land Use		Taxation or	Fees			
Code Compliance		Municipal (	Court		Technology	or Communications			
		Municipal L	egislation	$\boxtimes$	Transportati	ion or Mobility			
Contracts or Procurement		Neighborho	pods	$\boxtimes$	Zoning or Pla	atting			
Diversity, Equity, or Inclusion		Parks, Recr	eation, Libraries, or Museums						
Economic Development		Other: Ar	nything that is required to ol	btain a p	ermit, plat	or rezoning.			



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SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	All municipal qu	nunicipal questions related to case SP-2017-0427D (Pulte Homes - Bratton Lane Improvements)						
	I —	∑ This municipal question pertains to real property. *If checked, either a property address or legal description is required.						
PROPERTY ADDRESS	Address			Suite or Apartme	ent Number			
OR LEGAL DESCRIPTION	16250 Bratton L	ane						
LEGAL DESCRIPTION	City			State	Zip Code			
	Austin			TX	78728			
	Property Legal I	Description						
	0280230201, 02	·						
Culting A Markey (-)*. Charles II au								
Subject Matter(s)*: Check all su	bject matters th							
Accessibility or Persons with	Disabilities		Matters, Air or Water tershed Protection	Permits	(Building, Site Plans)			
		Finance, Budge	t, or Investments	Permits	(Other)			
Animals		Health, Healtho	care, Mental Health, or s		afety, Policy, Fire, EMS, or ncy Planning and Response			
Annexation		Historic Preserv	vation	Public U or Recyc	Itilities, Energy, Water, Solid Waste Cling			
Arts, Music, Film, Cultural or Creative Industries		Hospitality, Tou	urism, Events, or Convention	Quality	of Life Affairs			
Aviation		Human Rights	or Immigration		ate			
City Infrastructure or Public	Works	Labor or Workf	orce	Rules, P	roposed Rules, or Rule Making			
Civil Service, Municipal Emp Retirement Systems	loyment, or	∠ Land Developm	nent or Land Use	Taxation	n or Fees			
Code Compliance		Municipal Cour	t	Technol	ogy or Communications			
		Municipal Legis	slation		rtation or Mobility			
Contracts or Procurement		☐ Neighborhoods	5	Zoning o	or Platting			
Diversity, Equity, or Inclusion	n	Parks, Recreati	on, Libraries, or Museums					
Economic Development		Other: Anyth	ning that is required to ob	tain a permit, p	olat or rezoning.			



Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

# Section 2: Municipal Question

For each municipal question on which the individual lobbyist will lobby, provide a separate page with

- 1) a specific description of each municipal question
- 2) an address or legal description of the real property, if real property is the subject of the municipal question
- 3) the subject matter(s) from the list of subjects below that apply to the specific municipal question

SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	All municipal qu	icipal questions related to the property (Starbucks)				
	I —	ipal question perta	ains to real property. *If che	ecked, either a	property address or legal	
PROPERTY ADDRESS	Address		1	Suite or Apartm	ent Number	
OR LEGAL DESCRIPTION	1200 Barton Spi	rings Road				
LEGAL DESCRIPTION	City			State	Zip Code	
	Austin			TX	78704	
	Property Legal [	Description				
	parcel ID no. 01					
Cubic et Matteu/s\*. Chooleall au	la at mantta un the	-4	minimal municipal charge			
Subject Matter(s)*: Check all su	bject matters th	at apply to the mu	nicipal question above			
Accessibility or Persons with	Disabilities	Environmen Quality, or V	tal Matters, Air or Water Vatershed Protection	Permits	s (Building, Site Plans)	
Affordability		Finance, Buc	lget, or Investments	Permits	s (Other)	
Animals		Health, Heal Human Serv	thcare, Mental Health, or ices		Safety, Policy, Fire, EMS, or ency Planning and Response	
Annexation		Historic Pres	ervation	Public U	Jtilities, Energy, Water, Solid Waste cling	
Arts, Music, Film, Cultural or Creative Industries		Hospitality, Center	Tourism, Events, or Conventior	Quality	of Life Affairs	
Aviation		Human Righ	ts or Immigration	Real Est	tate	
City Infrastructure or Public	Works	Labor or Wo	rkforce	Rules, F	Proposed Rules, or Rule Making	
Civil Service, Municipal Emp Retirement Systems	loyment, or	∠ Land Develo	pment or Land Use	Taxatio	n or Fees	
Code Compliance		Municipal Co	ourt	Techno	logy or Communications	
		Municipal Le	egislation		ortation or Mobility	
Contracts or Procurement		☐ Neighborhoo	ods		or Platting	
Diversity, Equity, or Inclusion	n	Parks, Recre	ation, Libraries, or Museums			
Economic Development		Other: Any	ything that is required to ob	otain a permit, <sub>I</sub>	olat or rezoning.	



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## Section 2: Municipal Question

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SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	All municipal que Pecora II)	I municipal questions related to case C8-2017-0182.0A (Resubdivision of Block F Met Center II, Section 5 and Buratt ecora II)						
PROPERTY ADDRESS	This munici description	pal question pertains to is required.		cked, either a prop	_			
OR		•		dite of Apartment	vuilibei			
LEGAL DESCRIPTION	3306 McCall Lan	е						
	City		S	State	Zip Code			
	Austin		Т	гх	78744			
	Property Legal D	escription						
	1 , 3	•						
Subject Matter(s)*: Check all su	bject matters tha	t apply to the municipal	question above					
Accessibility or Persons with	Disabilities	Environmental Matersh	ters, Air or Water ed Protection	Permits (Bu	ilding, Site Plans)			
		Finance, Budget, or	Investments	Permits (Ot	her)			
Animals		Health, Healthcare, Human Services	Mental Health, or		y, Policy, Fire, EMS, or Planning and Response			
Annexation			n	Public Utilit or Recycling	ies, Energy, Water, Solid Waste g			
Arts, Music, Film, Cultural or Creative Industries		Hospitality, Tourism Center	, Events, or Convention	Quality of L	ife Affairs			
Aviation		Human Rights or Im	migration	Real Estate				
City Infrastructure or Public	Works	Labor or Workforce		Rules, Prop	osed Rules, or Rule Making			
Civil Service, Municipal Empl Retirement Systems	oyment, or	□ Land Development	or Land Use	Taxation or	Fees			
Code Compliance		Municipal Court		Technology	or Communications			
		Municipal Legislatio	n		ion or Mobility			
Contracts or Procurement		Neighborhoods		Zoning or P	latting			
Diversity, Equity, or Inclusion	ı	Parks, Recreation, L	ibraries, or Museums					
Economic Development		Other: Anything	that is required to obt	ain a permit, plat	or rezoning.			



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# Section 2: Municipal Question

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SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	All municipal que	unicipal questions related to case SP-2013-0451C(XT) (High Seas)					
PROPERTY ADDRESS	This municip	pal question pertains to real property. is required.	*If checked, either a pr				
OR	4845 Spicewood	Springs Road					
LEGAL DESCRIPTION	City		State	Zip Code			
	Austin		TX	78759			
	Property Legal D	escription					
	5 p 3 y 30						
Subject Matter(s)*· Check all sub	piect matters that	t apply to the municipal question above	/P				
Accessibility or Persons with		Environmental Matters, Air or Water Quality, or Watershed Protection	ar	Building, Site Plans)			
Affordability		Finance, Budget, or Investments	Permits (	Other)			
Animals		Health, Healthcare, Mental Health, Human Services		ety, Policy, Fire, EMS, or cy Planning and Response			
Annexation		Historic Preservation	Public Uti or Recycli	lities, Energy, Water, Solid Waste, ng			
Arts, Music, Film, Cultural or Creative Industries		Hospitality, Tourism, Events, or Con Center	vention Quality of	Life Affairs			
Aviation		Human Rights or Immigration	Real Estat	re			
City Infrastructure or Public V	Vorks	Labor or Workforce	Rules, Pro	posed Rules, or Rule Making			
Civil Service, Municipal Emplo	oyment, or		Taxation	or Fees			
Code Compliance		Municipal Court	☐ Technolog	gy or Communications			
		Municipal Legislation		ation or Mobility			
Contracts or Procurement		☐ Neighborhoods		Platting			
Diversity, Equity, or Inclusion		Parks, Recreation, Libraries, or Mus	eums				
Economic Development		Other: Anything that is required	d to obtain a permit, pla	at or rezoning.			



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# Section 2: Municipal Question

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SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	All municipal ques	l municipal questions related to case SP-2017-0356C (Burleson Warehouse)						
DROBERTY ADDRESS	This municipal description is		pertains to real property. *If ch	ecked, e	either a prop	perty address or legal		
PROPERTY ADDRESS	Address			Suite or	Apartment N	lumber		
OR LEGAL DESCRIPTION	7019 Burleson Ro	ad						
LEGAL DESCRIPTION	City			State		Zip Code		
	Austin			TX		78744		
	Property Legal De	scription						
Subject Matter(s)*: Check all sub	lect matters that	annly to the	municinal question above					
Accessibility or Persons with I	-	Environi	mental Matters, Air or Water or Watershed Protection	$\boxtimes$	Permits (Bui	lding, Site Plans)		
Affordability		Finance,	Budget, or Investments		Permits (Oth	ner)		
Animals		Health,	Healthcare, Mental Health, or Services			y, Policy, Fire, EMS, or Planning and Response		
Annexation		Historic	Preservation		Public Utiliti or Recycling	es, Energy, Water, Solid Waste		
Arts, Music, Film, Cultural or Creative Industries		Hospital Center	ity, Tourism, Events, or Conventio	n 🗌	Quality of Li	fe Affairs		
Aviation		Human	Rights or Immigration		Real Estate			
City Infrastructure or Public V	Vorks	Labor or	Workforce		Rules, Propo	osed Rules, or Rule Making		
Civil Service, Municipal Emplo	yment, or	∠ Land De	velopment or Land Use		Taxation or I	Fees		
Code Compliance		Municip	al Court		Technology	or Communications		
		Municip	al Legislation		Transportati	on or Mobility		
Contracts or Procurement		Neighbo	orhoods	$\boxtimes$	Zoning or Pla	atting		
Diversity, Equity, or Inclusion		Parks, R	ecreation, Libraries, or Museums					
Economic Development		Other:	Anything that is required to o	btain a p	permit, plat	or rezoning.		



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# Section 2: Municipal Question

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- 1) a specific description of each municipal question
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SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	All municipal ques	ll municipal questions related to case C8J-2017-0234.0A (McComb - The Hills of Bear Creek)					
	This municip	-	ertains to real property. *If ch	ecked, e	either a prop	perty address or legal	
PROPERTY ADDRESS	Address			Suite o	r Apartment N	Number	
OR LEGAL DESCRIPTION	2101 FM 1626						
LEGAL DESCRIPTION	City			State		Zip Code	
	Austin			TX		78652	
	Property Legal De	escription					
	tax parcel id: 044	3281102					
Subject Matter(s)*: Check all sub	ject matters that	apply to the	municipal question above				
Accessibility or Persons with	Disabilities	Environn Quality,	nental Matters, Air or Water or Watershed Protection	$\boxtimes$	Permits (Bu	ilding, Site Plans)	
		Finance,	Budget, or Investments	$\boxtimes$	Permits (Otl	her)	
Animals		Health, H	Healthcare, Mental Health, or Services			y, Policy, Fire, EMS, or Planning and Response	
Annexation		Historic	Preservation	$\boxtimes$	Public Utiliti or Recycling	ies, Energy, Water, Solid Waste S	
Arts, Music, Film, Cultural or Creative Industries		Hospitali Center	ity, Tourism, Events, or Conventio	on 🗌	Quality of Li	ife Affairs	
Aviation		Human F	Rights or Immigration	$\boxtimes$	Real Estate		
City Infrastructure or Public V	Vorks	Labor or	Workforce		Rules, Propo	osed Rules, or Rule Making	
Civil Service, Municipal Emplo	oyment, or	∑ Land Dev	velopment or Land Use		Taxation or	Fees	
Code Compliance		Municipa	al Court		Technology	or Communications	
		Municipa Municipa	al Legislation	$\boxtimes$	Transportat	ion or Mobility	
Contracts or Procurement		Neighbo	rhoods	$\boxtimes$	Zoning or Pl	atting	
Diversity, Equity, or Inclusion		Parks, Re	ecreation, Libraries, or Museums				
Economic Development		Other:	Anything that is required to o	btain a <sub>l</sub>	permit, plat	or rezoning.	



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# Section 2: Municipal Question

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.0.01	sore more than one manien	par Question, ene	K the Maa Maartional Maintipal Question k	accon below.			
	CIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	Any municipal question relating to case SP-2017-0225C (Piedra Warehouse)					
	PROPERTY ADDRESS	This municip	val question pertains to real property. *If choos required.	ecked, either a			
	OR			Suite of Aparti	nent Number		
	LEGAL DESCRIPTION	9700 Gray Blvd					
	City		State	Zip Code			
		Austin		TX	78758		
		Property Legal De	escription				
		tax parcel ID: 024					
Subje	ct Matter(s)*: Check all suk	ject matters that	t apply to the municipal question above				
$\boxtimes$	Accessibility or Persons with I	Disabilities	Environmental Matters, Air or Water Quality, or Watershed Protection	Permi	ts (Building, Site Plans)		
$\boxtimes$	Affordability		Finance, Budget, or Investments	Permi	ts (Other)		
	Animals		Health, Healthcare, Mental Health, or Human Services		Safety, Policy, Fire, EMS, or gency Planning and Response		
	Annexation			Public or Rec	Utilities, Energy, Water, Solid Waste cycling		
	Arts, Music, Film, Cultural or Creative Industries		Hospitality, Tourism, Events, or Convention Center	n 🗌 Qualit	ry of Life Affairs		
	Aviation		Human Rights or Immigration	⊠ Real E	state		
$\boxtimes$	City Infrastructure or Public V	Vorks	Labor or Workforce	Rules,	Proposed Rules, or Rule Making		
	Civil Service, Municipal Emplo Retirement Systems	oyment, or	□ Land Development or Land Use	Taxati	on or Fees		
$\boxtimes$	Code Compliance		Municipal Court	Techn	ology or Communications		
$\boxtimes$	Construction		Municipal Legislation	∑ Transı	portation or Mobility		
	Contracts or Procurement		Neighborhoods	Zoning	g or Platting		
	Diversity, Equity, or Inclusion		Parks, Recreation, Libraries, or Museums				
	Economic Development		Other: Anything that is required to ob	otain a permit,	, plat or rezoning.		



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## **Section 2: Municipal Question**

- 1) a specific description of each municipal question
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- 3) the subject matter(s) from the list of subjects below that apply to the specific municipal question

To report more than one Muni	cipal Question, cli	ck the "Add Additional Municipal Question" bu	utton below.					
SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	Any and all muni	Any and all municipal questions related to case SP-2017-0231T (Better Half & Hold Out)						
PROPERTY ADDRESS	_	pal question pertains to real property. *If cheris required.	cked, either a pro	perty address or legal				
OR	Address	9	Suite or Apartment I	Number				
LEGAL DESCRIPTION	1120 W 5th Stre	et						
	City		State	Zip Code				
	Austin	-	ТХ	78703				
	Property Legal D	Description						
Subject Matter(s)*: Check all s	ubject matters tha	at apply to the municipal question above						
Accessibility or Persons wit	h Disabilities	Environmental Matters, Air or Water Quality, or Watershed Protection	Permits (Bu	ilding, Site Plans)				
Affordability		Finance, Budget, or Investments	Permits (Ot	her)				
Animals		Health, Healthcare, Mental Health, or Human Services		ry, Policy, Fire, EMS, or Planning and Response				
Annexation		Historic Preservation	Public Utilit or Recycling	ies, Energy, Water, Solid Waste				
Arts, Music, Film, Cultural of Creative Industries	or	Hospitality, Tourism, Events, or Convention Center	Quality of L	ife Affairs				
Aviation		Human Rights or Immigration	Real Estate					
City Infrastructure or Public	Works	Labor or Workforce	Rules, Prop	osed Rules, or Rule Making				
Civil Service, Municipal Emp Retirement Systems	oloyment, or		Taxation or	Fees				
Code Compliance		Municipal Court	Technology	or Communications				
		Municipal Legislation		cion or Mobility				
Contracts or Procurement		☐ Neighborhoods	Zoning or P	latting				
Diversity, Equity, or Inclusion	on	Parks, Recreation, Libraries, or Museums						
Economic Development		Other: Anything that is required to obt	tain a permit, plat	or rezoning.				



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# Section 2: Municipal Question

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SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	All municipal ques	ll municipal questions related to case SP-2015-0577C (Hotel John Glenn)						
DDODEDTY ADDDESS	This municipal description is	al question pertains to real property s required.	*If checked, either a pr	operty address or legal				
PROPERTY ADDRESS	Address		Suite or Apartmen	t Number				
OR	8000 E Ben White	e Blvd						
LEGAL DESCRIPTION	City		State	Zip Code				
	Austin		TX	78744				
	Property Legal De	escription						
		·						
Subject Matter(s)*: Check all sub	iect matters that	apply to the municipal question abo	OVA					
Subject Matter(s) . Check all sub	gect matters that							
Accessibility or Persons with [	Disabilities	Environmental Matters, Air or Wa Quality, or Watershed Protection	ter Nermits (E	Building, Site Plans)				
Affordability		Finance, Budget, or Investments	Permits (0	Other)				
Animals		Health, Healthcare, Mental Health Human Services		ety, Policy, Fire, EMS, or cy Planning and Response				
Annexation			Public Uti or Recycli	lities, Energy, Water, Solid Waste ng				
Arts, Music, Film, Cultural or Creative Industries		Hospitality, Tourism, Events, or Co Center	onvention	Life Affairs				
Aviation		Human Rights or Immigration	Real Estat	e				
City Infrastructure or Public V	/orks	Labor or Workforce	Rules, Pro	posed Rules, or Rule Making				
Civil Service, Municipal Emplo	yment, or	□ Land Development or Land Use	☐ Taxation (	or Fees				
Code Compliance		Municipal Court	☐ Technolog	gy or Communications				
		Municipal Legislation		ation or Mobility				
Contracts or Procurement		Neighborhoods		Platting				
Diversity, Equity, or Inclusion		Parks, Recreation, Libraries, or Mu	useums					
Economic Development		Other: Anything that is require	ed to obtain a permit, pla	at or rezoning.				



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SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	All municipal ques Schultz)	all municipal questions related to property and cases SP-2013-0289C,SP-2008-0226C (Covered Bridge SP Correction-chultz)					
PROPERTY ADDRESS	I —	<ul> <li>☑ This municipal question pertains to real property. *If checked, either a property address or legal description is required.</li> <li>Address</li> <li>Suite or Apartment Number</li> </ul>					
OR	6804 Covered Bri	idge Drive					
LEGAL DESCRIPTION	City		State	Zip Code			
	Austin		TX	78736			
	Property Legal Do	escription					
	, , ,						
Subject Matter(s)*: Check all sub	piect matters that	t apply to the municipal question abov	re				
Accessibility or Persons with		Environmental Matters, Air or Wate Quality, or Watershed Protection	r	Building, Site Plans)			
Affordability		Finance, Budget, or Investments	Permits (	Other)			
Animals		Health, Healthcare, Mental Health, of Human Services		fety, Policy, Fire, EMS, or cy Planning and Response			
Annexation		Historic Preservation	Public Ut or Recycl	ilities, Energy, Water, Solid Waste			
Arts, Music, Film, Cultural or Creative Industries		Hospitality, Tourism, Events, or Con-		f Life Affairs			
Aviation		Human Rights or Immigration	🔀 Real Esta	te			
City Infrastructure or Public V	Vorks	Labor or Workforce	Rules, Pro	oposed Rules, or Rule Making			
Civil Service, Municipal Emplo Retirement Systems	oyment, or	□ Land Development or Land Use	☐ Taxation	or Fees			
Code Compliance		Municipal Court	Technolo	gy or Communications			
		Municipal Legislation		tation or Mobility			
Contracts or Procurement		Neighborhoods	Zoning or	Platting			
Diversity, Equity, or Inclusion		Parks, Recreation, Libraries, or Muse	eums				
Economic Development		Other: Anything that is required	d to obtain a permit, pl	at or rezoning.			



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# Section 2: Municipal Question

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SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	Any municipal que	estion related to case C8-2017-0019.0A		
PROPERTY ADDRESS	This municip description i	oal question pertains to real property s required.	. *If checked, either a pr	
OR	2201 E 22nd Stre	et		
LEGAL DESCRIPTION	City		State	Zip Code
	Austin		TX	78702
	Property Legal De	escription		
	ject matters that	t apply to the municipal question abo	ove	
Accessibility or Persons with		Environmental Matters, Air or Wat Quality, or Watershed Protection	tor	Building, Site Plans)
Affordability		Finance, Budget, or Investments	Permits (0	Other)
Animals		Health, Healthcare, Mental Health Human Services		ety, Policy, Fire, EMS, or cy Planning and Response
Annexation		Historic Preservation	Public Uti or Recycli	lities, Energy, Water, Solid Waste, ng
Arts, Music, Film, Cultural or Creative Industries		Hospitality, Tourism, Events, or Co Center	nvention  Quality of	Life Affairs
Aviation		Human Rights or Immigration	Real Estat	re
City Infrastructure or Public V	Vorks	Labor or Workforce	Rules, Pro	posed Rules, or Rule Making
Civil Service, Municipal Emplo Retirement Systems	oyment, or	∠ Land Development or Land Use	☐ Taxation (	or Fees
Code Compliance		Municipal Court	☐ Technolo	gy or Communications
		Municipal Legislation		ation or Mobility
Contracts or Procurement		Neighborhoods		Platting
Diversity, Equity, or Inclusion		Parks, Recreation, Libraries, or Mu	seums	
Economic Development		Other: Anything that is require	ed to obtain a permit, pla	at or rezoning.



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		, ,					
	CIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	Any municipal que	stion relate	d to case C14-2017-0152			
	PROPERTY ADDRESS	This municipa description is	-	pertains to real property. *If ch		either a prop	
	OR	3904 Medical Parl	CM2N		Suite of	Apartment	vuilibei
	LEGAL DESCRIPTION	3504 Medical Fair	. way				
		City			State		Zip Code
		Austin			TX		78756
		Property Legal De	scription				
		Tax Parcel #: 0221	.020506				
Subje	ct Matter(s)*: Check all sub	ject matters that	apply to t	ne municipal question above			
$\boxtimes$	Accessibility or Persons with I	Disabilities		onmental Matters, Air or Water cy, or Watershed Protection	$\boxtimes$	Permits (Bui	ilding, Site Plans)
$\boxtimes$	Affordability		Finan	ce, Budget, or Investments	$\boxtimes$	Permits (Oth	her)
	Animals			n, Healthcare, Mental Health, or n Services		Public Safety, Policy, Fire, EMS, or Emergency Planning and Response	
	Annexation		Histor	ic Preservation		Public Utiliti or Recycling	ies, Energy, Water, Solid Was
	Arts, Music, Film, Cultural or Creative Industries		Hospi Cente	tality, Tourism, Events, or Conventic r	on 🗌	Quality of Li	fe Affairs
	Aviation		Huma	n Rights or Immigration		Real Estate	
$\boxtimes$	City Infrastructure or Public V	Vorks	Labor	or Workforce		Rules, Propo	osed Rules, or Rule Making
	Civil Service, Municipal Emplo Retirement Systems	oyment, or	∑ Land	Development or Land Use		Taxation or	Fees
$\boxtimes$	Code Compliance		Munic	cipal Court		Technology	or Communications
$\boxtimes$	Construction		Munio	cipal Legislation	$\boxtimes$	Transportat	ion or Mobility
	Contracts or Procurement		Neigh	borhoods	$\boxtimes$	Zoning or Pl	atting
	Diversity, Equity, or Inclusion		Parks	Recreation, Libraries, or Museums			
	Economic Development		Other	Anything that is required to o	btain a p	permit, plat	or rezoning



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To report more than one Municipal Question, click the "Add Additional Municipal Question" button below.

SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	Any municipal question related to case SP-2017-0526C.					
DDODEDTY ADDDESS	This municip		ains to real property. *If ch	ecked, e	ither a prop	perty address or legal
PROPERTY ADDRESS	Address			Suite or	Apartment N	lumber
OR LEGAL DESCRIPTION	1311 Airport Com	merce Dr				
LEGAL DESCRIPTION	City			State		Zip Code
	Austin			TX		78741
	Property Legal De	escription				
	iect matters that	apply to the mu	unicipal guestion above			
Accessibility or Persons with I		Environmen	ntal Matters, Air or Water Watershed Protection		Permits (Bui	lding, Site Plans)
Affordability		Finance, Bu	dget, or Investments	$\boxtimes$	Permits (Oth	ner)
Animals		Health, Hea	Ithcare, Mental Health, or vices			y, Policy, Fire, EMS, or Planning and Response
Annexation		Historic Pre	servation		Public Utiliti or Recycling	es, Energy, Water, Solid Waste
Arts, Music, Film, Cultural or Creative Industries		Hospitality, Center	Tourism, Events, or Conventio	n 🗌	Quality of Li	fe Affairs
Aviation		Human Righ	its or Immigration		Real Estate	
City Infrastructure or Public V	Vorks	Labor or Wo	orkforce		Rules, Propo	osed Rules, or Rule Making
Civil Service, Municipal Emplo	oyment, or	∠ Land Development     ∠ Land Develo	opment or Land Use		Taxation or I	Fees
Code Compliance		Municipal C	ourt		Technology	or Communications
		Municipal Lo	egislation	$\boxtimes$	Transportati	ion or Mobility
Contracts or Procurement		☐ Neighborho	ods	$\boxtimes$	Zoning or Pla	atting
Diversity, Equity, or Inclusion		Parks, Recre	eation, Libraries, or Museums			
Economic Development		Other: An	ything that is required to ol	btain a p	ermit, plat	or rezoning



Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

# Section 2: Municipal Question

For each municipal question on which the individual lobbyist will lobby, provide a separate page with

- 1) a specific description of each municipal question
- 2) an address or legal description of the real property, if real property is the subject of the municipal question
- 3) the subject matter(s) from the list of subjects below that apply to the specific municipal question

To report more than one Municipal Question, click the "Add Additional Municipal Question" button below.

SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	Any municipal question related to development on this site.				
DDODEDTY ADDDESS	This municipal description is		rtains to real property. *If ch	ecked, eith	er a property address or legal
PROPERTY ADDRESS	Address			Suite or Ap	artment Number
OR	5639 Airport Blvd				
LEGAL DESCRIPTION	City			State	Zip Code
	Austin			тх	78745
	Property Legal De	scription			
		<u> </u>			
Subject Matter(s)*: Check all sub	viact matters that	annly to the n	aunicinal quartien above		
Subject Matter(s) : Check all sub	iject matters that				
Accessibility or Persons with I	Disabilities	Quality, or	ental Matters, Air or Water r Watershed Protection	Pe	rmits (Building, Site Plans)
		Finance, B	sudget, or Investments	⊠ Pe	rmits (Other)
Animals		Health, Health	ealthcare, Mental Health, or rvices		blic Safety, Policy, Fire, EMS, or nergency Planning and Response
Annexation		Historic Pr	reservation		blic Utilities, Energy, Water, Solid Waste Recycling
Arts, Music, Film, Cultural or Creative Industries		Hospitality Center	y, Tourism, Events, or Convention	n 🗌 Qu	ality of Life Affairs
Aviation		Human Ri	ghts or Immigration	⊠ Re	al Estate
City Infrastructure or Public V	Vorks	Labor or V	Vorkforce	Ru	les, Proposed Rules, or Rule Making
Civil Service, Municipal Emplo	oyment, or	∑ Land Deve	elopment or Land Use	Ta:	xation or Fees
Code Compliance		Municipal	Court	□ Tee	chnology or Communications
		Municipal	Legislation	∑ Tra	ansportation or Mobility
Contracts or Procurement		☐ Neighborh	noods	∑ Zo	ning or Platting
Diversity, Equity, or Inclusion		Parks, Rec	reation, Libraries, or Museums		
Economic Development		Other:	anything that is required to ob	btain a perr	nit, plat or rezoning



Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

# Section 2: Municipal Question

- 1) a specific description of each municipal question
- 2) an address or legal description of the real property, if real property is the subject of the municipal question
- 3) the subject matter(s) from the list of subjects below that apply to the specific municipal question

To report more than one Municipal Question, click the "Add Additional Municipal Question" button below.						
SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	Any municipal qu	Any municipal question related to case C8J-2018-0035.0A (Fisher-Raftelis Subdivision)				
PROPERTY ADDRESS	_	pal question pertains to real property. *If chec is required.		_		
OR	10110 & 10120		Suite or Apartment I	Number		
LEGAL DESCRIPTION	10110 & 10120	NIIISLUITE DITVE				
	City		State	Zip Code		
	Austin	1	ГХ	78736		
	Property Legal [	Description				
Subject Matter(s)*: Check all su	ubject matters that	at apply to the municipal question above				
Accessibility or Persons with	n Disabilities	Environmental Matters, Air or Water Quality, or Watershed Protection	Permits (Bu	ilding, Site Plans)		
Affordability		Finance, Budget, or Investments	Permits (Ot	her)		
Animals		Health, Healthcare, Mental Health, or Human Services		y, Policy, Fire, EMS, or Planning and Response		
Annexation		Historic Preservation	Public Utilit or Recycling	ies, Energy, Water, Solid Waste g		
Arts, Music, Film, Cultural o	r	Hospitality, Tourism, Events, or Convention Center	Quality of L	ife Affairs		
Aviation		Human Rights or Immigration	Real Estate			
City Infrastructure or Public	Works	Labor or Workforce	Rules, Prop	osed Rules, or Rule Making		
Civil Service, Municipal Emp Retirement Systems	oloyment, or		Taxation or	Fees		
Code Compliance		Municipal Court	Technology	or Communications		
Construction		Municipal Legislation	☐ Transportat	ion or Mobility		
Contracts or Procurement		☐ Neighborhoods	Zoning or P	latting		
Diversity, Equity, or Inclusion	n	Parks, Recreation, Libraries, or Museums				
Economic Development		Other: Anything that is required to obt	ain a permit, plat	or rezoning		



Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

### **Section 2: Municipal Question**

- 1) a specific description of each municipal question
- 2) an address or legal description of the real property, if real property is the subject of the municipal question
- 3) the subject matter(s) from the list of subjects below that apply to the specific municipal question

To report more than one M	lunicipal Question, c	lick the "Add Additional Municipal Question" bu	itton below.			
SPECIFIC DESCRIPTION OF MUNICIPAL QUESTION	Any municipal o	Any municipal question related to case NPA-2018-0001.01 (410 West Alpine Neighborhood Plan Amendment)				
PROPERTY ADDRESS		cipal question pertains to real property. *If checon is required.	cked, either a prop	perty address or legal		
OR	Address		Suite or Apartment Number			
LEGAL DESCRIPTION	410 West Alpir	e Road				
LEGAL DESCRIPTION	City	S	State	Zip Code		
	Austin	1	ГХ	78704		
	Property Legal	Description				
Subject Matter(s)*: Check	all subject matters th	nat apply to the municipal question above				
Accessibility or Persons	with Disabilities	Environmental Matters, Air or Water Quality, or Watershed Protection	Permits (Bu	ilding, Site Plans)		
Affordability		Finance, Budget, or Investments	Permits (Ot	her)		
Animals		Health, Healthcare, Mental Health, or Human Services		y, Policy, Fire, EMS, or Planning and Response		
Annexation		Historic Preservation	Public Utilit or Recycling	ies, Energy, Water, Solid Waste		
Arts, Music, Film, Cultu Creative Industries	ral or	Hospitality, Tourism, Events, or Convention Center	Quality of L	ife Affairs		
Aviation		Human Rights or Immigration	Real Estate			
City Infrastructure or P	ublic Works	Labor or Workforce	Rules, Prop	osed Rules, or Rule Making		
Civil Service, Municipal Retirement Systems	Employment, or	□ Land Development or Land Use	Taxation or	Fees		
Code Compliance		Municipal Court	Technology	or Communications		
Construction		Municipal Legislation		ion or Mobility		
Contracts or Procureme	ent	Neighborhoods	Zoning or P	latting		
Diversity, Equity, or Inc	lusion	Parks, Recreation, Libraries, or Museums				
Economic Developmen	t	Other: Anything that is required to obt	ain a permit, plat	or rezoning		



Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

### **Section 2: Municipal Question**

- 1) a specific description of each municipal question
- 2) an address or legal description of the real property, if real property is the subject of the municipal question
- 3) the subject matter(s) from the list of subjects below that apply to the specific municipal question

To report mo	ore than one Munici	pal Question, clic	k the "A	dd Add	litional Municipal	Question" b	utton b	elow.		
	ESCRIPTION OF THE PAL QUESTION*	Any municipal question related to development on this property								
PROPE	ERTY ADDRESS	This municipal question pertains to real property. *If checked, either a property address or legal description is required.								
PROPE	OR	Address					Suite or	Apartment N	lumber	
IFGΔI	DESCRIPTION	801 E 32nd Street	t							
LLOAL	DESCRIPTION	City					State		Zip Code	
		Austin					TX		78758	
		Property Legal De	Property Legal Description							
		LOT 2 RESUB OF A	A PART O	F OLT 5	DIVISION C					
Subject Matt	er(s)*: Check all sub	ject matters that	apply t	o the n	nunicipal questior	n above				
Accessi	bility or Persons with	Disabilities			ental Matters, Air o r Watershed Protec		$\boxtimes$	Permits (Bui	lding, Site Plans	)
Afforda	ability		Fir	nance, B	udget, or Investme	nts	$\boxtimes$	Permits (Oth	ner)	
Animal	S			ealth, He uman Se	ealthcare, Mental Hervices	ealth, or			y, Policy, Fire, EN Planning and Re	
Annexa	ation		⊠ His	storic Pr	reservation			Public Utilitie or Recycling	es, Energy, Wate	er, Solid Waste
1 1	lusic, Film, Cultural or e Industries			ospitality enter	y, Tourism, Events, (	or Conventior	n 🗌	Quality of Lif	fe Affairs	
Aviatio	n		☐ Hu	ıman Ri	ghts or Immigration			Real Estate		
City Inf	rastructure or Public V	Vorks	Lal	bor or V	Vorkforce			Rules, Propo	osed Rules, or Ru	ıle Making
	rvice, Municipal Emplo nent Systems	oyment, or	∑ Laı	nd Deve	elopment or Land U	se		Taxation or I	Fees	
Code C	ompliance		Mu	unicipal	Court			Technology	or Communicati	ons
Constru	uction		Mu	unicipal	Legislation		$\boxtimes$	Transportati	on or Mobility	
Contra	cts or Procurement		☐ Ne	eighborh	noods		$\boxtimes$	Zoning or Pla	atting	
Diversi	ty, Equity, or Inclusion		Pa	ırks, Rec	reation, Libraries, o	or Museums				
Econor	nic Development		⊠ Ot	ther:	anything that is re	quired to ob	tain a p	ermit, plat o	or rezoning	



Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

# Section 2: Municipal Question

- 1) a specific description of each municipal question
- 2) an address or legal description of the real property, if real property is the subject of the municipal question
- 3) the subject matter(s) from the list of subjects below that apply to the specific municipal question

To report more than one Municipal Question, click the "Add Additional Municipal Question" button below.							
SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	Any municipal c	Any municipal question related to development on this property					
PROPERTY ADDRESS		This municipal question pertains to real property. *If checked, either a property address or legal description is required.					
OR	10110 &10120		Suite or Apartment I	Number			
LEGAL DESCRIPTION			24	7's Code			
	City		State TX	Zip Code 78736			
		L.	17	76750			
	Property Legal	·					
	ABS 405 SUK 5.	28 HEISSNER G ACR 1.650 / Prop ID: 0406580205					
Subject Matter(s)*: Check all	subject matters th	at apply to the municipal question above					
Accessibility or Persons wi	th Disabilities	Environmental Matters, Air or Water Quality, or Watershed Protection	Permits (Bu	ilding, Site Plans)			
Affordability		Finance, Budget, or Investments	Permits (Ot	her)			
Animals		Health, Healthcare, Mental Health, or Human Services		ry, Policy, Fire, EMS, or Planning and Response			
Annexation		Historic Preservation	Public Utilit or Recycling	ies, Energy, Water, Solid Waste			
Arts, Music, Film, Cultural Creative Industries	or	Hospitality, Tourism, Events, or Convention Center	Quality of L	ife Affairs			
Aviation		Human Rights or Immigration	Real Estate				
City Infrastructure or Publ	ic Works	Labor or Workforce	Rules, Prop	osed Rules, or Rule Making			
Civil Service, Municipal Em Retirement Systems	nployment, or	☐ Land Development or Land Use	Taxation or	Fees			
Code Compliance		Municipal Court	Technology	or Communications			
		Municipal Legislation	Transportat	cion or Mobility			
Contracts or Procurement		Neighborhoods	Zoning or P	latting			
Diversity, Equity, or Inclus	ion	Parks, Recreation, Libraries, or Museums					
Economic Development		Other: Anything that is required to obt	ain a permit, plat	or rezoning			



Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

# Section 3: Client

## Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	$\hfill \square$ I represented no clients and received no client compensation during the applicable reporting period			
CLIENT				
NAME				
☐ Client is an individual	Organization Name or Client Last Name, as applicable* Horse Thief Hollow, Ltd (550			
	Client Business Address*	Client Apartment	or Suite Number	
	4506 Erin Lane			
CLIENT ADDRESS AND	Client City* Austin	Client State*	Client Zip Code*	
NATURE OF	Nature of Client's Business*			
BUSINESS	land development			

#### **Section 3b:**

#### **Client Compensation**

Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT	Compensation Category*  less than \$10,000	OR	(\$) Exact Amount			
COMPENSATION						
	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.					
	If you fail to provide the above Client Compensation information, provide your reason(s) (250 char. max):					

\* Indicates a required field

Add Another Client Page



Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

# Section 3: Client

## Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	$\square$ I represented no clients and received no client compensation during the applicable reporting period				
CLIENT					
NAME					
☐ Client is an individual	Organization Name or Client Last Name, as applicable*  Colonetta Family Limited Partnership				
	Client Business Address*	Client Apartment o	or Suite Number		
	PO Box 214				
CLIENT ADDRESS AND	Client City* Austin	Client State*	Client Zip Code*  78610		
NATURE OF	Nature of Client's Business*				
BUSINESS	land development				

### Section 3b:

#### **Client Compensation**

Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT	Compensation Category*  less than \$10,000	OR	(\$) Exact Amount			
COMPENSATION	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.  If you fail to provide the above Client Compensation information, provide your reason(s) (250 char. max):					

\* Indicates a required field

Add Another Client Page



Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

## Section 3: Client

## Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	I represented no clients and received no client compensation during the applicable reporting period			
	1			
CLIENT				
NAME				
Client is an individual	Organization Name or Client Last Name, as applicable*	1		
	Met Center NYCTEX Phase II, LTD			
	Client Business Address*	Client Apartment o	r Suite Number	
	901 Rio Grande Street			
CLIENT ADDRESS	Client City*	Client State*	Client Zip Code*	
AND	Austin	тх	78701	
NATURE OF	Nature of Client's Business*			
BUSINESS	land development			

#### **Section 3b:**

#### **Client Compensation**

Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

	Compensation Category*		(\$) Exact Amount			
CLIENT	less than \$10,000	OR				
COMPENSATION						
	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.					
	If you fail to provide the above Client Compensation information, provide your reason(s) (250 char. max):					

\* Indicates a required field

Add Another Client Page



Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

# Section 3: Client

## Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	I represented no clients and received no client compensation during the applicable reporting period			
	1			
CLIENT				
NAME				
Client is an individual	Organization Name or Client Last Name, as applicable*			
	Met Center II Partners			
	Client Business Address*	Client Apartment o	r Suite Number	
	901 Rio Grande Street			
CLIENT ADDRESS	Client City*	Client State*	Client Zip Code*	
AND	Austin	тх	78701	
NATURE OF	Nature of Client's Business*			
BUSINESS	land development			

#### **Section 3b:**

#### **Client Compensation**

Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

	Compensation Category*		(\$) Exact Amount
CLIENT	less than \$10,000	OR	
COMPENSATION			
	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.		
	If you fail to provide the above Client Co	ompensation information,	, provide your reason(s) (250 char. max):

\* Indicates a required field

Add Another Client Page

Delete this page

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Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

# Section 3: Client

## Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	I represented no clients and received no client compensation during the applicable reporting period			
	1			
CLIENT				
NAME				
Client is an individual	Organization Name or Client Last Name, as applicable*	1		
	JEAE Family Ltd. Partnership (Jeff Blatt)			
	Client Business Address*	Client Apartment o	r Suite Number	
_	920 E. Dean Keaton Street			
CLIENT ADDRESS	Client City*	Client State*	Client Zip Code*	
AND	Austin	тх	78705	
NATURE OF	Nature of Client's Business*			
BUSINESS	land development			

#### **Section 3b:**

#### **Client Compensation**

Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT	Compensation Category*  less than \$10,000	OR	(\$) Exact Amount
COMPENSATION			
	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.		
	If you fail to provide the above Client Compensatio	n information	, provide your reason(s) (250 char. max):

\* Indicates a required field

Add Another Client Page



Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

# Section 3: Client

## Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no clien reporting period	t compensation du	iring the applicable
CLIENT NAME			
Client is an individual	Organization Name or Client Last Name, as applicable*  Milestone Community Builders		
	Client Business Address* 9111 Jollyville Road	Client Apartment	or Suite Number
CLIENT ADDRESS AND NATURE OF BUSINESS	Client City*  Austin  Nature of Client's Business*  land development	Client State*	Client Zip Code* 78759

### Section 3b:

#### **Client Compensation**

Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT	Compensation Category*		(\$) Exact Amount	
CLIENT	less than \$10,000	OR		
COMPENSATION				
	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.			
	If you fail to provide the above Client Compensation information, provide your reason(s) (250 char. max):			
	7300 S Congress Ave; Turtle Rock Condominiums			

\* Indicates a required field

Add Another Client Page



Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

# Section 3: Client

## Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	I represented no clients and received no clien reporting period	t compensation du	uring the applicable
CLIENT NAME			
Client is an individual	Organization Name or Client Last Name, as applicable*  CBVMedical LLC (William D Schultz - Covered Bridge)		
	Client Business Address* PO BOX 340310	Client Apartment	or Suite Number
CLIENT ADDRESS AND NATURE OF BUSINESS	Client City*  Austin  Nature of Client's Business*  land development	Client State*	Client Zip Code*  78734

### Section 3b:

#### **Client Compensation**

Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT	Compensation Category*		(\$) Exact Amount
CLIENT	less than \$10,000	OR	
COMPENSATION			
	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required		
	for compensation totaling \$500,000 or more.		
	If you fail to provide the above Client Compensation information, provide your reason(s) (250 char. max):		
	Covered Bridge Commercial SP corrections.		

\* Indicates a required field

Add Another Client Page

Delete this page

Page 49 of 95 Revised: 9/25/2017



Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

# Section 3: Client

## Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	I represented no clients and received no client compensation during the applicable reporting period			
CLIENT				
NAME				
Client is an individual	Organization Name or Client Last Name, as applicable*			
	CBV Sustainable Dev, LLC (William D Schultz- Covered Bridge)			
	Client Business Address*	Client Apartment o	or Suite Number	
	P O BOX 340310			
CLIENT ADDRESS	Client City*	Client State*	Client Zip Code*	
AND	Austin	ТХ	7873.4	
NATURE OF	Nature of Client's Business*			
BUSINESS	land development			

#### **Section 3b:**

#### **Client Compensation**

Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT	Compensation Category*		(\$) Exact Amount
CLIENT	less than \$10,000	OR	
COMPENSATION			
	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required		
	for compensation totaling \$500,000 or more.		
	If you fail to provide the above Client Compensation information, provide your reason(s) (250 char. max):		
	Covered Bridge Commercial SP corrections.		

\* Indicates a required field

Add Another Client Page



Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

## Section 3: Client

## Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	I represented no clients and received no client compensation during the applicable reporting period			
CLIENT				
TANKE				
Client is an individual	Organization Name or Client Last Name, as applicable*			
	North I-35 Business Park, LP (William Schultz)			
	Client Business Address*	Client Apartment o	or Suite Number	
	PO Box 684309			
CLIENT ADDRESS	Client City*	Client State*	Client Zip Code*	
AND	Austin	ТХ	78768	
NATURE OF	Nature of Client's Business*			
BUSINESS	land development			

#### Section 3b:

#### **Client Compensation**

Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

	Compensation Category*		(\$) Exact Amount
CLIENT	less than \$10,000	OR	
COMPENSATION			
	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.		
	If you fail to provide the above Client Co	ompensation information,	, provide your reason(s) (250 char. max):

\* Indicates a required field

Add Another Client Page



Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 3: Client

## Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	$\hfill \square$ I represented no clients and received no client compensation during the applicable reporting period		
	T		
CLIENT			
NAME			
☐ Client is an individual	Organization Name or Client Last Name, as applicable*  Zenith Hospitatlity, LLC (Patel-Hotel on John Glenn)		
	Client Business Address*	Client Apartment	or Suite Number
	6403 W HWY 290		
CLIENT ADDRESS AND	Client City*  Austin	Client State*	Client Zip Code*  78735
NATURE OF	Nature of Client's Business*		
BUSINESS	land development		

### Section 3b:

#### **Client Compensation**

Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT	Compensation Category*	OR	(\$) Exact Amount
COMPENSATION	icas than \$10,000		
	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.  If you fail to provide the above Client Compensation information, provide your reason(s) (250 char. max):		

\* Indicates a required field

Add Another Client Page



Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

# Section 3: Client

## Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	I represented no clients and received no client compensation during the applicable reporting period		
	T		
CLIENT			
NAME			
Client is an individual	Organization Name or Client Last Name, as applicable*		
	PPF AMLI COVERED BRIDGE DRIVE LLC		
	Client Business Address*	Client Apartment o	r Suite Number
	141 W JACKSON BLVD STE 300		
CLIENT ADDRESS	Client City*	Client State*	Client Zip Code*
AND	Chicago	IL	60604
NATURE OF	Nature of Client's Business*		
BUSINESS	Land development		

#### **Section 3b:**

#### **Client Compensation**

Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT	Compensation Category*	OR	(\$) Exact Amount
COMPENSATION	icas than \$10,000		
	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.  If you fail to provide the above Client Compensation information, provide your reason(s) (250 char. max):		

\* Indicates a required field

Add Another Client Page



Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

# Section 3: Client

## Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	I represented no clients and received no client compensation during the applicable reporting period		
	T		
CLIENT			
NAME			
Client is an individual	Organization Name or Client Last Name, as applicable*	1	
	Zydeco Development Corporation		
	Client Business Address*	Client Apartment o	r Suite Number
	901 Rio Grande St Ste 200		
CLIENT ADDRESS	Client City*	Client State*	Client Zip Code*
AND	Austin	тх	78701
NATURE OF	Nature of Client's Business*		
BUSINESS	land development		

#### **Section 3b:**

#### **Client Compensation**

Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT	Compensation Category*  less than \$10,000	OR	(\$) Exact Amount
COMPENSATION	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.  If you fail to provide the above Client Compensation information, provide your reason(s) (250 char. max)		

\* Indicates a required field

Add Another Client Page



Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

## Section 3: Client

## Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	I represented no clients and received no client compensation during the applicable reporting period		
	T		
CLIENT			
NAME			
Client is an individual	Organization Name or Client Last Name, as applicable*		
	House Assn. of Beta XI Chapter of Kappa Kappa Gamma		
	Client Business Address*	Client Apartment o	r Suite Number
	PO Box 5517		
CLIENT ADDRESS	Client City*	Client State*	Client Zip Code*
AND	Austin	тх	78763
NATURE OF	Nature of Client's Business*		
BUSINESS	land development		

#### **Section 3b:**

#### **Client Compensation**

Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT	Compensation Category*  less than \$10,000	OR	(\$) Exact Amount
COMPENSATION			
	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.		
	If you fail to provide the above Client Compensatio	n information	, provide your reason(s) (250 char. max):

\* Indicates a required field

Add Another Client Page



Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

# Section 3: Client

## Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	$\hfill \square$ I represented no clients and received no client compensation during the applicable reporting period		
	T		
CLIENT			
NAME			
☐ Client is an individual	Organization Name or Client Last Name, as applicable*  Coleto Corner, LLC (Scott Turner)		
	Client Business Address*	Client Apartment o	or Suite Number
CHENT	1409 W 6TH ST		
CLIENT ADDRESS	Client City*	Client State*	Client Zip Code*
AND	Austin	ТХ	78703
NATURE OF	Nature of Client's Business*		
BUSINESS	land development		

#### **Section 3b:**

#### **Client Compensation**

Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT	Compensation Category*	OR	(\$) Exact Amount
COMPENSATION	icas than \$10,000		
	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.  If you fail to provide the above Client Compensation information, provide your reason(s) (250 char. max):		

\* Indicates a required field

Add Another Client Page



Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

# Section 3: Client

## Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	$\square$ I represented no clients and received no client reporting period	nt compensation during the applicable
CLIENT NAME	Client Title Client First Name*  Angelou	Middle
Client is an individual	Organization Name or Client Last Name, as applicable*	Client Suffix
	Angelos	
	Client Business Address*	Client Apartment or Suite Number
	8801 Golden Rain Cove	
CLIENT		
ADDRESS	Client City*	Client State* Client Zip Code*
AND	Austin	TX 78735
NATURE OF	Nature of Client's Business*	
BUSINESS	land development	

#### **Section 3b:**

#### **Client Compensation**

Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

	Compensation Category*		(\$) Exact Amount
CLIENT	less than \$10,000	OR	
COMPENSATION			
	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.		
	If you fail to provide the above Client Co	ompensation information,	, provide your reason(s) (250 char. max):

\* Indicates a required field

Add Another Client Page



Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 3: Client

## Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	I represented no clients and received no client reporting period	nt compensation during the applicable
CLIENT NAME	Client Title Client First Name*  John	Middle
Client is an individual	Organization Name or Client Last Name, as applicable*	Client Suffix
	Sasaridis	
	Client Business Address*	Client Apartment or Suite Number
	8801 Golden Rain Cove	
CLIENT		
ADDRESS	Client City*	Client State* Client Zip Code*
AND	Austin	TX 78735
NATURE OF	Nature of Client's Business*	
BUSINESS	land development	

#### Section 3b:

#### **Client Compensation**

Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

_	Compensation Category*		(\$) Exact Amount
CLIENT	less than \$10,000	OR	
COMPENSATION			
	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.		
	If you fail to provide the above Client (	Compensation information	, provide your reason(s) (250 char. max):

\* Indicates a required field

Add Another Client Page

Delete this page

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Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

# Section 3: Client

## Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no clien reporting period	t compensation dur	ring the applicable
CLIENT			
NAME			
Client is an individual	Organization Name or Client Last Name, as applicable*		
	Starbucks (Kane Russell Coleman Logan PC)		
	Client Business Address*	Client Apartment o	r Suite Number
_	1601 Elm Street	Suite 3700	
CLIENT ADDRESS	Client City*	Client State*	Client Zip Code*
AND	Dallas	ТХ	77056
NATURE OF	Nature of Client's Business*		
BUSINESS	land development		

#### Section 3b:

#### **Client Compensation**

Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

	Compensation Category*		(\$) Exact Amount
CLIENT	less than \$10,000	OR	
COMPENSATION			
	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.		
	If you fail to provide the above Client C	compensation information	, provide your reason(s) (250 char. max):

\* Indicates a required field

Add Another Client Page



Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

# Section 3: Client

## Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	$\Box$ I represented no clients and received no clients reporting period	nt compensation du	ring the applicable
	T		
CLIENT			
NAME			
☐ Client is an individual	Organization Name or Client Last Name, as applicable*  Pulte Homes		
	Client Business Address*	Client Apartment of	or Suite Number
	9401 Amberglen Blvd.	Building I, Suite 15	0
CLIENT ADDRESS AND	Client City*  Austin	Client State*	Client Zip Code*  78729
NATURE OF	Nature of Client's Business*		
BUSINESS	land development		

### Section 3b:

#### **Client Compensation**

Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT	Compensation Category*  less than \$10,000	OR	(\$) Exact Amount
COMPENSATION	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.  If you fail to provide the above Client Compensation information, provide your reason(s) (250 char. max):		

\* Indicates a required field

Add Another Client Page



Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

# Section 3: Client

## Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no clien reporting period	t compensation du	ring the applicable
	I		
CLIENT			
Client is an individual	Organization Name or Client Last Name, as applicable*		
	Oars Investments, LLC (High Seas)		
	Client Business Address*	Client Apartment o	or Suite Number
	8705 Shoal Creek Blvd.	Suite #109	
CLIENT ADDRESS	Client City*	Client State*	Client Zip Code*
AND	Austin	TX	78757
NATURE OF	Nature of Client's Business*		
BUSINESS	land development		

### Section 3b:

#### **Client Compensation**

Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT	Compensation Category*  less than \$10,000	OR	(\$) Exact Amount	
COMPENSATION	Per City Code Section 4-8-6(A)(j), the exact comp for compensation totaling \$500,000 or more.  If you fail to provide the above Client Compensation is			

\* Indicates a required field

Add Another Client Page



Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

# Section 3: Client

## Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	I represented no clients and received no client reporting period	nt compensation	during the applicable
CLIENT	Client Title Client First Name*		Middle
NAME	Michael		
Client is an individual	Organization Name or Client Last Name, as applicable*	Client Suffix	_
	Shelton		
	Client Business Address*	Client Apartme	nt or Suite Number
	350 King Arthur Court		
CLIENT ADDRESS	Client City*	Client State*	Client Zip Code*
AND	Austin	TX	78746
NATURE OF	Nature of Client's Business*		
BUSINESS	land development		

#### **Section 3b:**

#### **Client Compensation**

Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT	Compensation Category* \$0	OR	(\$) Exact Amount
COMPENSATION	Per City Code Section 4-8-6(A)(j), the exact for compensation totaling \$500,000 or more		amount is <mark>required</mark>
	If you fail to provide the above Client Compensation	ation information,	, provide your reason(s) (250 char. max):

\* Indicates a required field

Add Another Client Page



Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

# Section 3: Client

## Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	I represented no clients and received no client reporting period	t compensation du	ring the applicable
	T		
CLIENT			
NAME			
☐ Client is an individual	Organization Name or Client Last Name, as applicable*  Risher Martin Homes (3904 Medical Pkwy)		
	Client Business Address*	Client Apartment o	r Suite Number
	4524 Burnet Road		
CLIENT ADDRESS AND	Client City*  Austin	Client State*	Client Zip Code*
NATURE OF	Nature of Client's Business*		
BUSINESS	land development		

### Section 3b:

#### **Client Compensation**

Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT	Compensation Category*  less than \$10,000	OR	(\$) Exact Amount
COMPENSATION	Per City Code Section 4-8-6(A)(j), the exact compe	nsation a	amount is required
	for compensation totaling \$500,000 or more.		
	If you fail to provide the above Client Compensation in	formation,	, provide your reason(s) (250 char. max):

\* Indicates a required field

Add Another Client Page



Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

# Section 3: Client

## Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	I represented no clients and received no client compensation during the applicable reporting period		
	1		
CLIENT			
NAME			
Client is an individual	Organization Name or Client Last Name, as applicable*		
	Thomson Family Limited Partnership (Slaughter Bluff Springs)		
	Client Business Address*	Client Apartment o	r Suite Number
_	7409 S. Congress Ave.		
CLIENT ADDRESS	Client City*	Client State*	Client Zip Code*
AND	Austin	ТХ	78745
NATURE OF	Nature of Client's Business*		
BUSINESS	land development		

#### Section 3b:

#### **Client Compensation**

Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT	Compensation Category*  less than \$10,000	OR	(\$) Exact Amount
COMPENSATION	Per City Code Section 4-8-6(A)(j), the exact competer for compensation totaling \$500,000 or more.  If you fail to provide the above Client Compensation in		

\* Indicates a required field

Add Another Client Page



Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 3: Client

## Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	I represented no clients and received no clien reporting period	t compensation du	uring the applicable
CLIENT NAME			
Client is an individual	Organization Name or Client Last Name, as applicable*  Ogden Rentals LP (JSteve Ogden- Better Half/Hold Out))		
	Client Business Address*  2604 Bridle Path	Client Apartment	or Suite Number
CLIENT ADDRESS AND NATURE OF BUSINESS	Client City*  Austin  Nature of Client's Business*  land development	Client State*	Client Zip Code* 78703

### Section 3b:

#### **Client Compensation**

Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT	Compensation Category*  less than \$10,000	OR	(\$) Exact Amount	
COMPENSATION	Per City Code Section 4-8-6(A)(j), the exact compe	nsation a	amount is required	
	for compensation totaling \$500,000 or more.			
	If you fail to provide the above Client Compensation information, provide your reason(s) (250 char. max):			

\* Indicates a required field

Add Another Client Page

Delete this page

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Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

## Section 3: Client

## Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	I represented no clients and received no client compensation during the applicable reporting period			
CLIENT				
NAME				
Client is an individual	Organization Name or Client Last Name, as applicable *  1205 1/2 W. 5th LLC (Jimmy Nassour - Better Half/Hold Out)			
	Client Business Address*	Client Apartment	or Suite Number	
	3839 Bee Caves Road			
CLIENT ADDRESS	Client City*  Austin	Client State*	Client Zip Code*	
AND NATURE OF	Nature of Client's Business*			
BUSINESS	land development			

#### Section 3b:

#### **Client Compensation**

Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

	Compensation Category*		(\$) Exact Amount	
CLIENT	less than \$10,000	OR		
COMPENSATION				
	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.			
	If you fail to provide the above Client Cor	npensation information,	, provide your reason(s) (250 char. max):	

\* Indicates a required field

Add Another Client Page



Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

# Section 3: Client

## Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	I represented no clients and received no client compensation during the applicable reporting period			
	1			
CLIENT				
NAME				
☐ Client is an individual	Organization Name or Client Last Name, as applicable*  Vertical Construction Management			
	Client Business Address*	Client Apartment of	or Suite Number	
	1209 South White Chapel Blvd.	Suite 180		
CLIENT ADDRESS AND	Client City* Southlake	Client State*	Client Zip Code* 76092	
NATURE OF	Nature of Client's Business*			
BUSINESS	land development			

### Section 3b:

#### **Client Compensation**

Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT	Compensation Category*  less than \$10,000	OR	(\$) Exact Amount
COMPENSATION			
	Per City Code Section 4-8-6(A)(j), the exact coll for compensation totaling \$500,000 or more.	amount is <mark>required</mark>	
	If you fail to provide the above Client Compensatio	n information	, provide your reason(s) (250 char. max):

\* Indicates a required field

Add Another Client Page



Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

# Section 3: Client

## Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	I represented no clients and received no client compensation during the applicable reporting period			
CLIENT				
NAME				
Client is an individual	Organization Name or Client Last Name, as applicable*			
	WW Corner, LLC (Scott Bell, MLou Patton)			
	Client Business Address*	Client Apartment o	or Suite Number	
	4505 Navajo Pass			
CLIENT ADDRESS	Client City*	Client State*	Client Zip Code*	
AND	Austin	ТХ	78745	
NATURE OF	Nature of Client's Business*			
BUSINESS	land development			

#### **Section 3b:**

#### **Client Compensation**

Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT	Compensation Category*  less than \$10,000	OR	(\$) Exact Amount
COMPENSATION			
	Per City Code Section 4-8-6(A)(j), the exact coll for compensation totaling \$500,000 or more.	amount is <mark>required</mark>	
	If you fail to provide the above Client Compensatio	n information	, provide your reason(s) (250 char. max):

\* Indicates a required field

Add Another Client Page

Delete this page

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Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 3: Client

## Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	$\hfill \square$ I represented no clients and received no client compensation during the applicable reporting period			
	T			
CLIENT				
NAME				
☐ Client is an individual	Organization Name or Client Last Name, as applicable*  Townbridge Homes, LLC (The Greens on Cooper Lane)			
	Client Business Address*	Client Apartment o	r Suite Number	
	PO Box 90638			
CLIENT ADDRESS AND	Client City*  Austin	Client State*	Client Zip Code*  78709	
NATURE OF	Nature of Client's Business*			
BUSINESS	land development			

### Section 3b:

#### **Client Compensation**

Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT	Compensation Category*  less than \$10,000	OR	(\$) Exact Amount
COMPENSATION	Per City Code Section 4-8-6(A)(j), the exact competer for compensation totaling \$500,000 or more.  If you fail to provide the above Client Compensation in		

\* Indicates a required field

Add Another Client Page



Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 3: Client

## Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

	I represented no clients and received no clien	nt compensation	during the applicable
NO CLIENTS TO REPORT	reporting period	it compensation	during the applicable
CLIENT	Client Title Client First Name*		Middle
NAME	Joseph		D
	Organization Name or Client Last Name, as applicable*  Christian (Christian MFG Inc)	Client Suffix	
	Client Business Address*	Client Apartme	ent or Suite Number
	12401 BARKER HOLLOW CV		
CLIENT ADDRESS	Client City*	Client State*	Client Zip Code*
AND	Austin	TX	78739
NATURE OF	Nature of Client's Business*		
BUSINESS	land development		
			,

#### **Section 3b:**

#### **Client Compensation**

Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT	Compensation Category*  less than \$10,000	OR	(\$) Exact Amount
COMPENSATION			
	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.		
	If you fail to provide the above Client Compensation	n information	, provide your reason(s) (250 char. max):

\* Indicates a required field

Add Another Client Page



Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

# Section 3: Client

## Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	I represented no clients and received no client compensation during the applicable reporting period		
CLIENT			
NAME			
Client is an individual	Organization Name or Client Last Name, as applicable*		
	Christian Laborde Properties, LP (Freight Barker/ Manchacca)		
	Client Business Address*	Client Apartment o	r Suite Number
	11726 Manchaca Road		
CLIENT ADDRESS	Client City*	Client State*	Client Zip Code*
AND	Austin	TX	78748
NATURE OF	Nature of Client's Business*		
BUSINESS	land development		

#### **Section 3b:**

#### **Client Compensation**

Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

	Compensation Category*		(\$) Exact Amount
CLIENT	less than \$10,000	OR	
COMPENSATION			
	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.		
	If you fail to provide the above Client Compensation information, provide your reason(s) (250 char. max):		

\* Indicates a required field

Add Another Client Page



Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

## Section 3: Client

## Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	I represented no clients and received no client compensation during the applicable reporting period		
	T		
CLIENT			
NAME			
Client is an individual	Organization Name or Client Last Name, as applicable* W2 Hill ACP II LP		
	Client Business Address*	Client Apartment	or Suite Number
	1221 South Mopac Expressway	355	
CLIENT ADDRESS AND NATURE OF	Client City* Austin	Client State*	Client Zip Code*  78746
	Nature of Client's Business*		
BUSINESS	land development		
1			

#### Section 3b:

#### **Client Compensation**

Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT	Compensation Category*  less than \$10,000	OR	(\$) Exact Amount
COMPENSATION			
	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.		
	If you fail to provide the above Client Compensation	n information	, provide your reason(s) (250 char. max):

\* Indicates a required field

Add Another Client Page



Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

# Section 3: Client

### Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	I represented no clients and received no client compensation during the applicable reporting period		
	T		
CLIENT			
NAME			
☐ Client is an individual	Organization Name or Client Last Name, as applicable*  Grove Residential Development, INC.		
	Client Business Address*	Client Apartment	or Suite Number
	9111 Jollyville Road	111	
CLIENT ADDRESS AND	Client City*  Austin	Client State*	Client Zip Code*  78759
NATURE OF	Nature of Client's Business*		
BUSINESS	land development		

#### Section 3b:

#### **Client Compensation**

Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

	Compensation Category*		(\$) Exact Amount
CLIENT	less than \$10,000	OR	
COMPENSATION			
	Per City Code Section 4-8-6(A)(j), the for compensation totaling \$500,000	amount is <mark>required</mark>	
	If you fail to provide the above Client Co	mpensation information,	, provide your reason(s) (250 char. max):

\* Indicates a required field

Add Another Client Page



Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 3: Client

### Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	I represented no clients and received no client compensation during the applicable reporting period		
	I		
CLIENT			
NAME			
Client is an individual	Organization Name or Client Last Name, as applicable*		
	6315 Spicewood, LP (David Kahn, The Spicewood Hotel)		
	Client Business Address*	Client Apartment o	r Suite Number
_	805 Congress Ave	300	
CLIENT ADDRESS	Client City*	Client State*	Client Zip Code*
AND	Austin	тх	78701
NATURE OF	Nature of Client's Business*		
BUSINESS	land development		

#### Section 3b:

#### **Client Compensation**

Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

	Compensation Category*		(\$) Exact Amount
CLIENT	less than \$10,000	OR	
COMPENSATION			
	Per City Code Section 4-8-6(A)(j), the for compensation totaling \$500,000	amount is required	
	If you fail to provide the above Client Co	ompensation information,	, provide your reason(s) (250 char. max):

\* Indicates a required field

Add Another Client Page



Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

# Section 3: Client

### Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	I represented no clients and received no clien reporting period	t compensation du	ring the applicable
	T		
CLIENT			
NAME			
☐ Client is an individual	Organization Name or Client Last Name, as applicable*  Alternate Real Estate, LLC		
	Client Business Address*	Client Apartment o	or Suite Number
	2307-A Riverside Farms Drive		
CLIENT ADDRESS AND	Client City* Austin	Client State*	Client Zip Code*  78741
NATURE OF	Nature of Client's Business*		
BUSINESS	land development		

### Section 3b:

#### **Client Compensation**

Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

	Compensation Category*		(\$) Exact Amount
CLIENT	less than \$10,000	OR	
COMPENSATION			
	Per City Code Section 4-8-6(A)(j), the exact competer for compensation totaling \$500,000 or more.	ensation	amount is <mark>required</mark>
	If you fail to provide the above Client Compensation information, provide your reason(s) (250 char. max):		

\* Indicates a required field

Add Another Client Page



Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

# Section 3: Client

### Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	I represented no clients and received no client compensation during the applicable reporting period		
CLIENT			
Client is an individual	Organization Name or Client Last Name, as applicable*		
	OM Nama Ganeshaya Corporation		
	Client Business Address*	Client Apartment o	or Suite Number
	11950 Chapel Road		
CLIENT	·		
ADDRESS	Client City*	Client State*	Client Zip Code*
AND	Dallas	ТХ	75234
NATURE OF	Nature of Client's Business*		
BUSINESS	land developmentY		

### Section 3b:

#### **Client Compensation**

Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT	Compensation Category*  less than \$10,000	OR	(\$) Exact Amount
COMPENSATION	Per City Code Section 4-8-6(A)(j), the exact competer for compensation totaling \$500,000 or more.  If you fail to provide the above Client Compensation in		

\* Indicates a required field

Add Another Client Page



Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

# Section 3: Client

### Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	$\square$ I represented no clients and received no client reporting period	nt compensation during the applicable
CLIENT NAME	Client Title Client First Name*  Jimmie L & Shirlene A	Middle
Client is an individual	Organization Name or Client Last Name, as applicable*	Client Suffix
	McComb	
	Client Business Address*	Client Apartment or Suite Number
	2507 Braemar Cove	
CLIENT		
ADDRESS	Client City*	Client State* Client Zip Code*
AND	Austin	TX 78747
NATURE OF	Nature of Client's Business*	
BUSINESS	land development	

#### **Section 3b:**

#### **Client Compensation**

Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT	Compensation Category* \$0	OR	(\$) Exact Amount
COMPENSATION	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.		
	If you fail to provide the above Client Compensation	ation information,	, provide your reason(s) (250 char. max):

\* Indicates a required field

Add Another Client Page



Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

# Section 3: Client

### Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	I represented no clients and received no client compensation during the applicable reporting period		
	T		
CLIENT			
NAME			
☐ Client is an individual	Organization Name or Client Last Name, as applicable*  H & B Development and Construction LP (Burleson Warehous		
	Client Business Address*	Client Apartment o	or Suite Number
	12400 Taylor Road		
CLIENT ADDRESS	Client City* Houston	Client State*	Client Zip Code*
AND	liouston		77041
NATURE OF	Nature of Client's Business*		
BUSINESS	land devleopment		

#### **Section 3b:**

#### **Client Compensation**

Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT	Compensation Category*  less than \$10,000	OR	(\$) Exact Amount
COMPENSATION	Per City Code Section 4-8-6(A)(j), the exact competer for compensation totaling \$500,000 or more.  If you fail to provide the above Client Compensation in		

\* Indicates a required field

Add Another Client Page



Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 3: Client

### Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

	T		
NO CLIENTS TO REPORT	I represented no clients and received no clients reporting period	nt compensation	during the applicable
CLIENT NAME	Client Title Client First Name*  Roger		Middle
	Organization Name or Client Last Name, as applicable*  Johnson c/o Martha Johnson	Client Suffix	
	Client Business Address*	Client Apartme	nt or Suite Number
	P.O. Box 1515		
CLIENT ADDRESS	Client City*	Client State*	Client Zip Code*
AND	Manchacca	TX	78652
NATURE OF	Nature of Client's Business*		
BUSINESS	land development		

#### **Section 3b:**

#### **Client Compensation**

Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT	Compensation Category*  less than \$10,000	OR	(\$) Exact Amount
COMPENSATION			
	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.  If you fail to provide the above Client Compensation information, provide your reason(s) (250 char. max):		

\* Indicates a required field

Add Another Client Page



Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 3: Client

### Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	I represented no clients and received no client compensation during the applicable reporting period			
CLIENT				
NAME				
Client is an individual	Organization Name or Client Last Name, as applicable*			
	Chaudhari Partnership (Homewood Suites Pecan Park)			
	Client Business Address*	Client Apartment o	r Suite Number	
	10800 Chateau Hill			
CLIENT ADDRESS	Client City*	Client State*	Client Zip Code*	
AND	Austin	тх	78758	
NATURE OF	Nature of Client's Business*			
BUSINESS	land development			

### Section 3b:

#### **Client Compensation**

Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT	Compensation Category*  less than \$10,000	OR	(\$) Exact Amount
COMPENSATION			
	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.		
	If you fail to provide the above Client Compensatio	n information	, provide your reason(s) (250 char. max):

\* Indicates a required field

Add Another Client Page



Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 3: Client

### Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	I represented no clients and received no client compensation during the applicable reporting period			
CLIENT				
NAME				
Client is an individual	Organization Name or Client Last Name, as applicable*	1		
	Piedra Holdings, LLC (Piedra Warehouse)			
	Client Business Address*	Client Apartment o	r Suite Number	
	10317 McKaiia Place			
CLIENT ADDRESS	Client City*	Client State*	Client Zip Code*	
AND	Austin	тх	78758	
NATURE OF	Nature of Client's Business*			
BUSINESS	land development			

#### **Section 3b:**

#### **Client Compensation**

Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT	Compensation Category*  less than \$10,000	OR	(\$) Exact Amount
COMPENSATION			
	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.		
	If you fail to provide the above Client Compensatio	n information	, provide your reason(s) (250 char. max):

\* Indicates a required field

Add Another Client Page



Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 3: Client

### Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	I represented no clients and received no client compensation during the applicable reporting period			
CLIENT NAME				
Client is an individual	Organization Name or Client Last Name, as applicable*  ZFB, LTD. (William B Pohl)			
	Client Business Address*  10800 Pecan Park Blvd	Client Apartment	or Suite Number	
CLIENT ADDRESS AND NATURE OF BUSINESS	Client City*  Austin  Nature of Client's Business*  land development	Client State*	Client Zip Code* 78750	

### Section 3b:

#### **Client Compensation**

Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

_	Compensation Category*		(\$) Exact Amount
CLIENT	less than \$10,000	OR	
COMPENSATION			
	Per City Code Section 4-8-6(A)(j), the exact compe	ensation	amount is <mark>required</mark>
	for compensation totaling \$500,000 or more.		
	If you fail to provide the above Client Compensation in	formation	, provide your reason(s) (250 char. max):

\* Indicates a required field

Add Another Client Page



Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 3: Client

### Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	I represented no clients and received no client compensation during the applicable reporting period			
CLIENT				
NAME				
Client is an individual	Organization Name or Client Last Name, as applicable*	1		
	Flower Hill Foundation			
	Client Business Address*	Client Apartment o	r Suite Number	
_	607 Pressler Street			
CLIENT ADDRESS	Client City*	Client State*	Client Zip Code*	
AND	Austin	ТХ	78703	
NATURE OF	Nature of Client's Business*			
BUSINESS	land development			

#### **Section 3b:**

#### **Client Compensation**

Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT	Compensation Category*  less than \$10,000	OR	(\$) Exact Amount
COMPENSATION			
	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.		
	If you fail to provide the above Client Compensatio	n information	, provide your reason(s) (250 char. max):

\* Indicates a required field

Add Another Client Page



Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 3: Client

### Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	I represented no clients and received no client compensation during the applicable reporting period			
CLIENT				
Client is an individual	Organization Name or Client Last Name, as applicable*			
	Howdy Honda Dealership			
	Client Business Address*	Client Apartment o	r Suite Number	
	1000 West State Street			
CLIENT ADDRESS	Client City*	Client State*	Client Zip Code*	
AND	Bristol	TN	37620	
NATURE OF	Nature of Client's Business*			
BUSINESS	land development			

### Section 3b:

#### **Client Compensation**

Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT	Compensation Category* \$0	OR	(\$) Exact Amount
COMPENSATION	Par City Code Section 4.9 C(A)(i) t	ha avast sammansation s	amount is required
	Per City Code Section 4-8-6(A)(j), t for compensation totaling \$500,00		amount is required
	If you fail to provide the above Client	Compensation information	, provide your reason(s) (250 char. max):

\* Indicates a required field

Add Another Client Page



Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

# Section 3: Client

### Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	I represented no clients and received no client compensation during the applicable reporting period		
CLIENT			
NAME			
Client is an individual	Organization Name or Client Last Name, as applicable*		
	Extended Stay America (Steve Sheets)		
	Client Business Address*	Client Apartment o	r Suite Number
	11525 North Community House Road	Suite 100	
CLIENT ADDRESS	Client City*	Client State*	Client Zip Code*
AND	Charolette	NC	28277
NATURE OF	Nature of Client's Business*		
BUSINESS	land development		

### Section 3b:

#### **Client Compensation**

Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT	Compensation Category*  less than \$10,000	OR	(\$) Exact Amount
COMPENSATION	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.  If you fail to provide the above Client Compensation information, provide your reason(s) (250 char. max):		

\* Indicates a required field

Add Another Client Page



Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

# Section 3: Client

### Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	I represented no clients and received no client compensation during the applicable reporting period		
	1		
CLIENT			
NAME			
Client is an individual	Organization Name or Client Last Name, as applicable*		
	Wonderworkers Properties, LLC.		
	Client Business Address*	Client Apartment o	or Suite Number
	107 West Stassney Lane		
CLIENT ADDRESS	Client City*	Client State*	Client Zip Code*
AND	Austin	тх	78745
NATURE OF	Nature of Client's Business*		
BUSINESS	land development		

#### **Section 3b:**

#### **Client Compensation**

Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

	Compensation Category*		(\$) Exact Amount
CLIENT	less than \$10,000	OR	
COMPENSATION			
	Per City Code Section 4-8-6(A)(j), the for compensation totaling \$500,000		amount is required
	If you fail to provide the above Client Co	ompensation information,	, provide your reason(s) (250 char. max):

\* Indicates a required field

Add Another Client Page

Delete this page

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Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 3: Client

### Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client reporting period	compensation during the applicable
CLIENT  NAME    Client is an individual	Client Title Client First Name*  Ms. Gretchen  Organization Name or Client Last Name, as applicable*  Raftelis	Middle  Client Suffix
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address*  10120 Rimstone Trail  Client City*  Austin  Nature of Client's Business*  To get an approved plat for the two properties and memorialize	Client Apartment or Suite Number  Client State* Client Zip Code*  TX 78736  e ownership lines.

### Section 3b:

#### **Client Compensation**

Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT	Compensation Category*		(\$) Exact Amount
	less than \$10,000	OR	
COMPENSATION	Per City Code Section 4-8-6(A)(j), the exact competer for compensation totaling \$500,000 or more.  If you fail to provide the above Client Compensation in Fisher-Raftelis Subdivision		

\* Indicates a required field

Add Another Client Page



Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

# Section 3: Client

### Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	I represented no clients and received no client compensation during the applicable reporting period		
CLIENT			
NAME			
☐ Client is an individual	Organization Name or Client Last Name, as applicable* Riverside Homes, LLC		
	Client Business Address*	Client Apartment o	or Suite Number
	1409 W 6th Street		
CLIENT ADDRESS AND	Client City* Austin	Client State*	Client Zip Code*
NATURE OF	Nature of Client's Business*		
BUSINESS	Residential Development and Entitlements		

### Section 3b:

#### **Client Compensation**

Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

	Compensation Category*		(\$) Exact Amount
CLIENT	less than \$10,000	OR	
COMPENSATION			
	Per City Code Section 4-8-6(A)(j), the for compensation totaling \$500,00		amount is <mark>required</mark>
	If you fail to provide the above Client C	compensation information	, provide your reason(s) (250 char. max):

\* Indicates a required field

Add Another Client Page



Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

# Section 3: Client

### Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no clients are reporting period	ent compensation	during the applicable
CLIENT  NAME  Client is an individual	Client Title Client First Name*  Ashvin & Pramila  Organization Name or Client Last Name, as applicable*  Srivastava	Client Suffix	Middle
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address*  801 E 32nd Street  Client City*  Austin  Nature of Client's Business*  Residential Development	Client Apartme  Client State*  TX	Client Zip Code*

#### **Section 3b:**

#### **Client Compensation**

Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

	Compensation Category*		(\$) Exact Amount
CLIENT	less than \$10,000	OR	
COMPENSATION			
	Per City Code Section 4-8-6(A)(j), the for compensation totaling \$500,000		amount is required
	If you fail to provide the above Client Co	ompensation information,	, provide your reason(s) (250 char. max):

\* Indicates a required field

Add Another Client Page



Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

### Section 4: Employee

For each person employed or retained by the individual lobbyist for the purpose of assisting in or preparing for lobbying (excluding purely clerical or administrative assistance), provide a separate page with the information below (City Code Section 4-8-5(B)(4)(c)). If the lobbyist has retained no employees, leave this page blank.

For additional employees, click "Add Another Employee Page" below.

NO EMPLOYEES TO REPORT	□ I employed or retained no employees during	the applicable reporting period
PERSON EMPLOYED OR RETAINED	Title First Name*  Last Name *  Employer*	Middle  Suffix  Occupation*
BUSINESS ADDRESS	Business Address*  City*	Apartment or Suite Number  State* Zip Code*
MAYOR/COUNCIL  RELATIVE  OR  HOUSEHOLD MEMBER	☐ Is the person identified above related (within the the Council Member, or a member of their household, and If yes, describe the nature of their employment *required.  First Name of Mayor/Council Member L	as defined in City Code Section 4-8-6(A)(5)?

\* Indicates a required field



If you are not submitting this form during a quarterly activity reporting deadline or to terminate your lobbyist registration, proceed directly to Section 8: Declaration and Electronic Submission.



### Section 5: Statement of No Activity

#### STATEMENT OF NO EXPENDITURES MADE AND NO COMPENSATION RECEIVED

Lobbyists who have **no reportable activity** for the reporting period must submit a Statement of No Activity to the Clerk's Office (City Code Section 4-8-6(D)).

By checking the **No Activity Confirmation**, I affirm that I have no reportable activity during this reporting period, as defined by the four conditions below.

- I received no Client Compensation during this activity period (§4-8-6(A)(2)).
- I made no Expenditures for lobbying during this activity period (§4-8-6(A)(3)).
- I have not exchanged money, goods, services, or anything of value totaling more than \$500 with a business entity in which a City Official has a substantial economic interest during this reporting period (§4-8-6(A)(4)).
- I have no employees who are household members or related (within third degree of consanguinity or affinity) to the Mayor or a Council Member to report during this reporting period (§4-8-6(A)(5)).

# No Activity Confirmation I have read the four conditions above and confirm that I have no reportable activity to disclose during this reporting period



Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

# **Section 6: Expenditure Totals**

Provide the total amount of expenditures for lobbying, sub-totaled by the categories listed below. A blank value will be interpreted as \$0 spent in that particular category (§4-8-6(A)(3)).

Cumulative expenditures of more than \$50 by an individual lobbyist per day per City Official in the expense categories listed below must be itemized on an Expenditure page.

	(\$) Reimbursement to Others	
	(\$) Food and Beverages	
	(\$) Transportation and Lodging	
	(\$) Gifts (other than Awards and Mementos)	
EXPENDITURE	(\$) Entertainment	
TOTALS	(\$) Awards and Mementos	
(Blank values	(\$) Honorariums	
will be interpreted as \$0)	(\$) Attendance of Council Members at Charitable Events or Fundraisers	
	(\$) Media Communications (broadcast, print, advertising, etc.)	
	(\$) Payments to persons who assist with Media Communications as defined in §4-8-6(A)(3)(j)	



Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

# Section 7: Expenditure

For each itemized expenditure, provide a separate page with the information below. Cumulative expenditures of more than \$50 per day per City Official in the expense categories provided below must be itemized on an Expenditure Page (§4-8-6(A)(3)).

Per §4-8-6(A)(4), exchanges of money, goods, services, or anything of value to a business or business interest of a City Official that total \$500 or more during the reporting period must also be itemized on an Expenditure Page.

For additional expenditures, click "Add Another Expenditure Page" below.

PAYEE NAME AND	Organization Name or Payee Last Name,	as applicable*			
BUSINESS INTEREST	This payee is a business or business in	nterest of a City Official			
INTEREST	If yes, First Name of City Official	Las	Last Name of City Official		
Payee is an individual					
	Department of City Official	Job	Job Title of City Official		
	Payee Address/ PO Box*		Payee Apartment or Suite Number		
PAYEE					
ADDRESS	Payee City*		Payee State*	Payee Zi	p Code*
EXPENDITURE DETAILS	(\$) Expenditure Amount* Expenditure Date* Category*  Purpose of the Expenditure*				
	ruipose of the Expenditure				
Identify each City Official who benefitted from or who may have been influenced by the expenditure, if applicable					
City Official First Name	City Official Last Name	Departmer	nt	Jo	ob Title
Add Another Expenditure Page		Delete this page 95 Revised: 9/25/201		95 Revised: 9/25/2017	



# Section 8: Declaration and Electronic Submission

#### **DECLARATION**

By my signature below and subject to the penalty of perjury, I swear or affirm that the facts provided in this Lobbyist Reporting Form are true and correct to the best of my knowledge and belief and include all information required to be reported by me pursuant to City Code, Chapter 4-8.

I understand that pursuant to §4-8-9(E) of the Austin City Code, this report is made under oath regardless of whether there is any jurat or affidavit of verification, including a signature.

A. Ron Thrower	1/9/2018
Typed Name	Report Date*

#### **Electronic Submission and Signature**

I have completed a **Lobbyist Contact Information Form**, and my signature and e-mail address are both on file at the City Clerk's Office.

New or Renewing Lobbyist Registrations are not considered complete until the appropriate registration fee has been paid. If you are registering for the first time as a lobbyist or are renewing your annual registration, you must remit payment via cash, check, or money order.